Healthy Kansans living in safe and sustainable environments.

Victorious VPD
Nothing to "Whoop" About!

Sheri Tubach

Jena Callen-Scholz

Amie Worthington

Chelsea Raybern

Elizabeth Lawlor

Bureau of Epidemiology and Public Health Informatics

Kansas Department of Health and Environment

Topics/Objectives

- **Notable VPD outbreaks**
- **Influenza Surveillance**
- **LTCF Toolkit**
- **Evaluation of College Immunization Practices**
- **Adolescent, kindergarten, 24 months immunization coverage assessments**
- **Perinatal Hepatitis B Prevention Program**

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Statewide Pertussis Outbreak 2012

Jena Callen-Scholz
Medical Investigator
Kansas Department of Health and Environment
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Pertussis

- **Highly communicable bacterial disease found in the mouths, noses and throats of infected people**
- **Transmission**
  - **Direct contact with discharges from respiratory mucous membranes of infected persons**
- **Signs/Symptoms**
  - **Cough lasting ≥ 14 days**
  - **Paroxysmal spasms of severe coughing**
  - **Whoop**
  - **Post-tussive vomiting**

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Pertussis Surveillance and Reporting

- Nationally notifiable
- Clinical case definition
  - Cough ≥2 weeks AND
  - At least one of the following:
    - paroxysms, whoop, post-tussive vomiting
- Probable case
  - Meets clinical case definition
  - Not laboratory confirmed
  - Not epidemiologically linked to a lab confirmed case
- Confirmed case
  - Culture positive OR
  - Clinical case and PCR positive OR
  - Clinical case and epi-linked to confirmed case

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Pertussis Cases in Kansas - 2012

- **887 cases reported in 53 counties**
  - **449 (50.6%) Confirmed**
  - **438 (49.4%) Probable**
- **37 (4%) were hospitalized**
  - **Median Age: 1 year (Range 5 days – 81 years)**
  - **16 (43%) were less than 6 months**
  - **5 (14%) were less than 2 months**
- **1 death in an adult**

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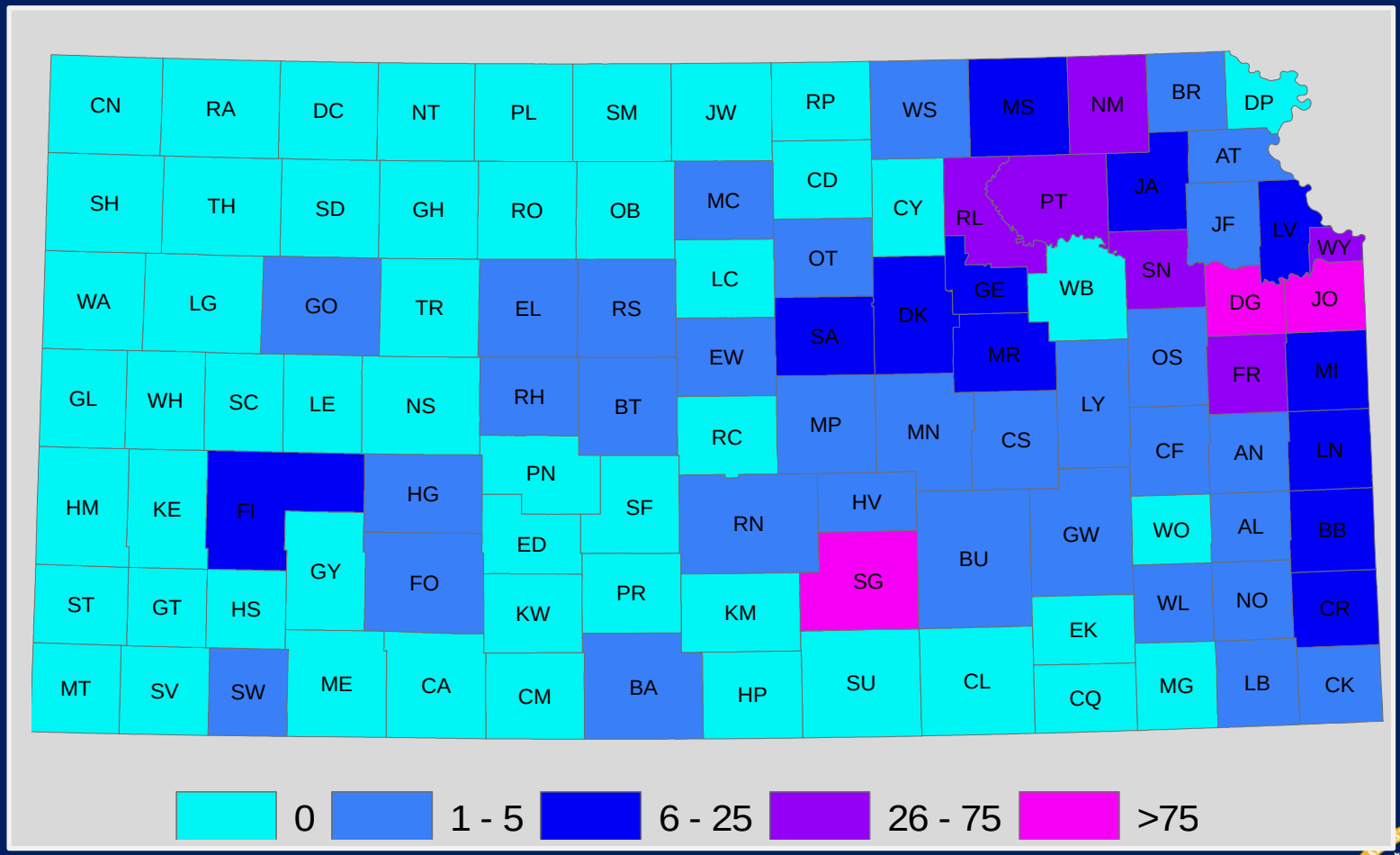
Number of Cases of Pertussis by County, 2012



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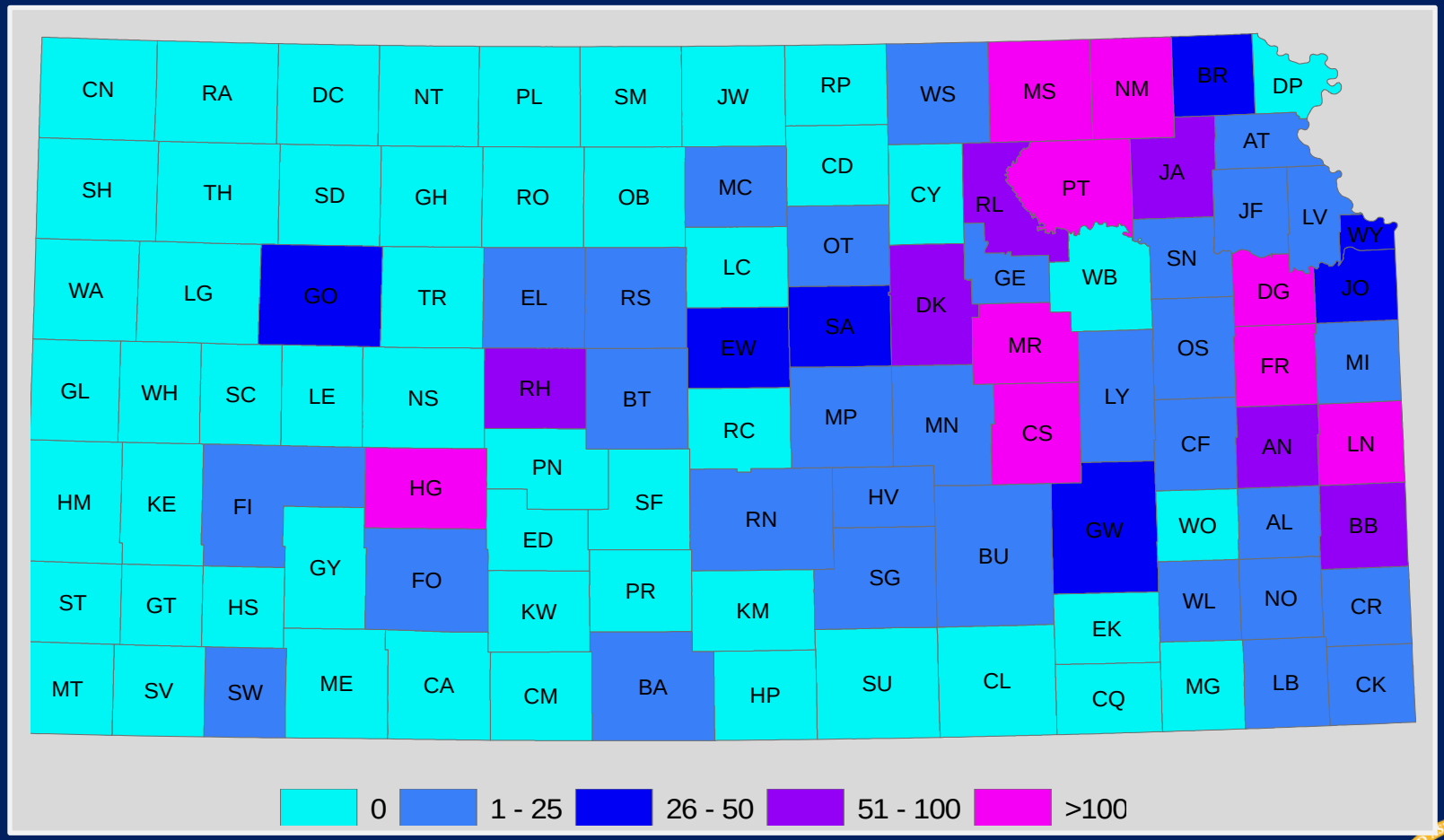
Incidence of Pertussis per 100,000 Population by County, 2012



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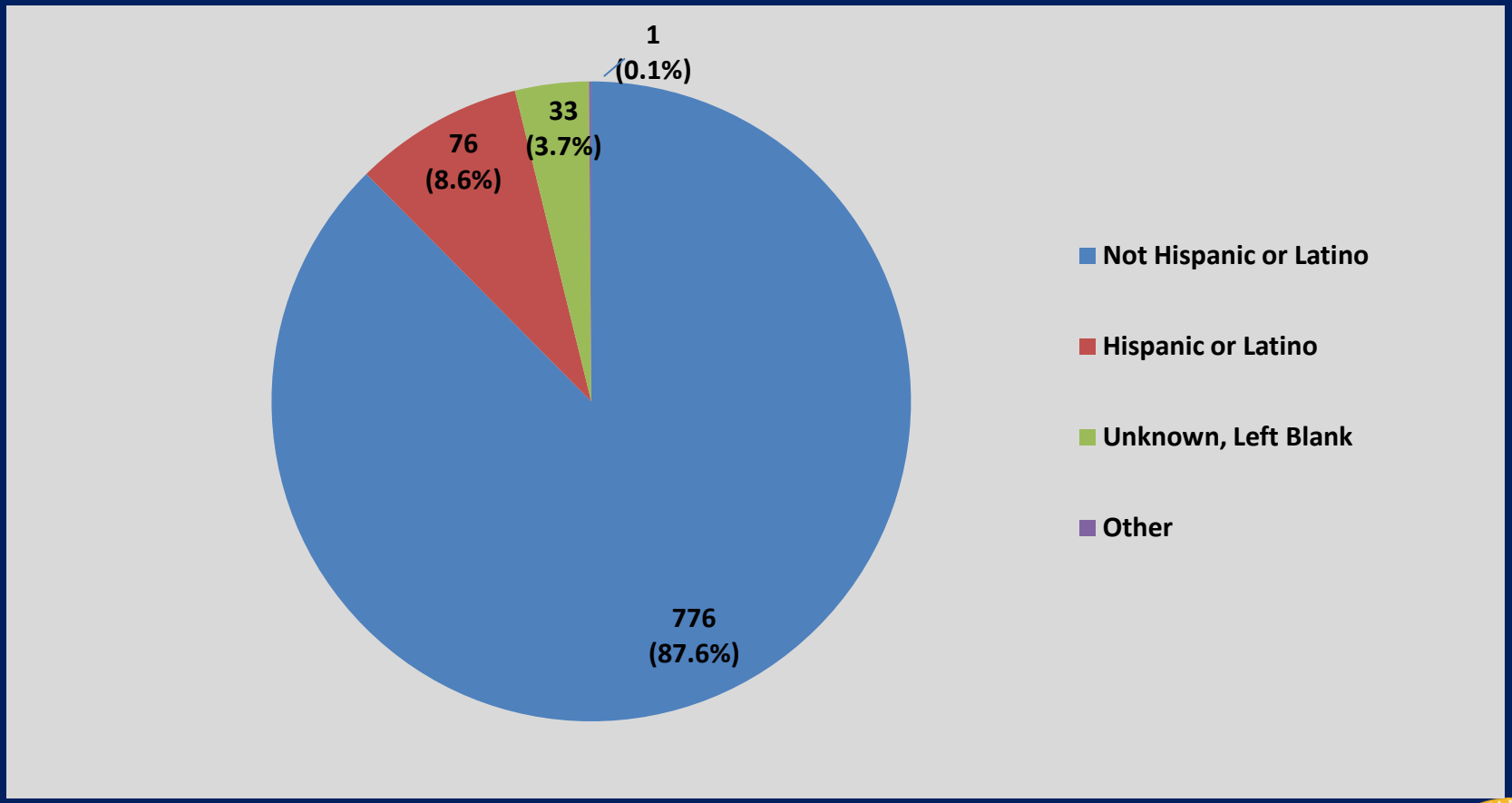
Confirmed and Probable Pertussis Cases by Race, 2012



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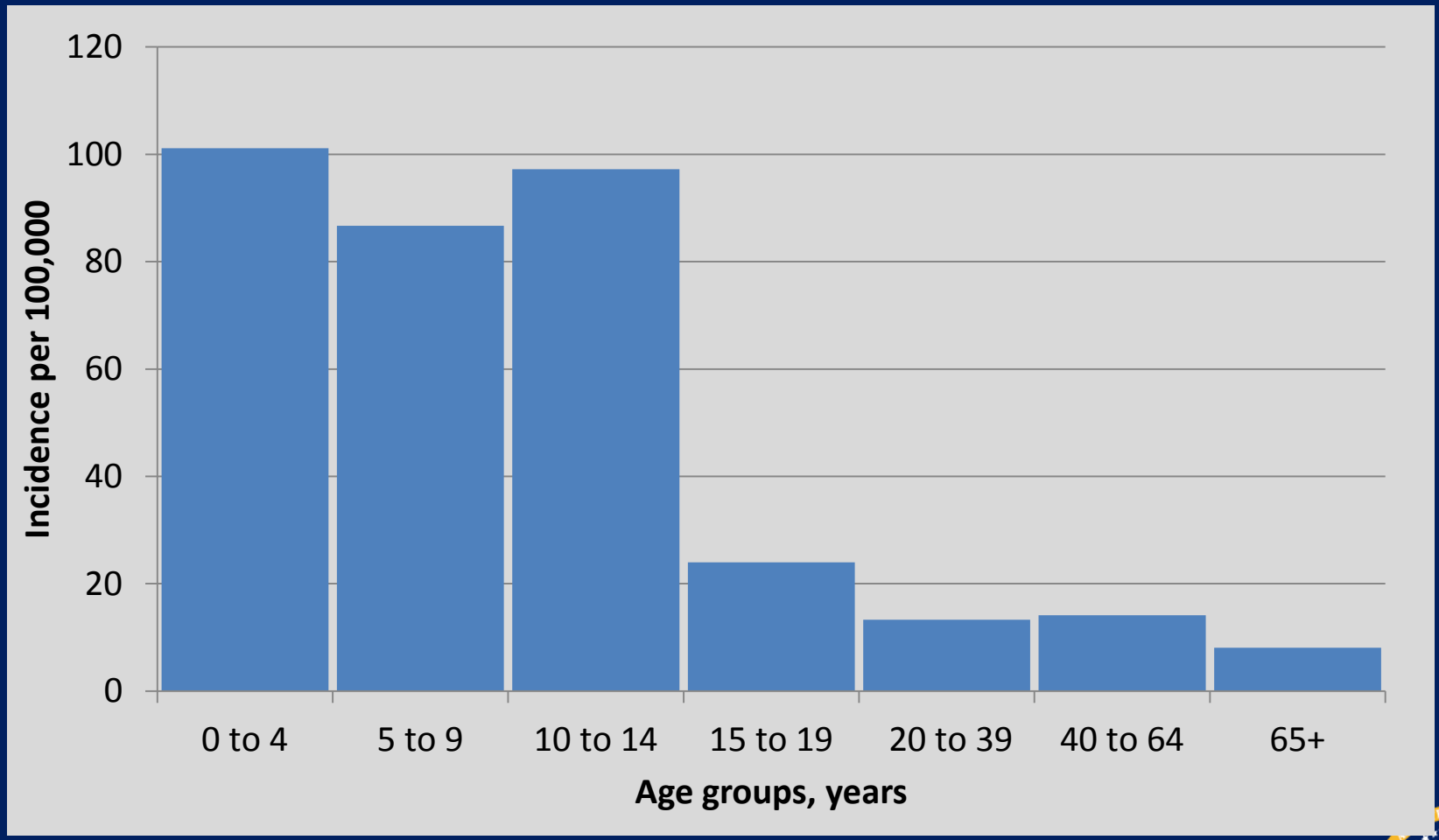
Incidence of Pertussis by Age group, 2012



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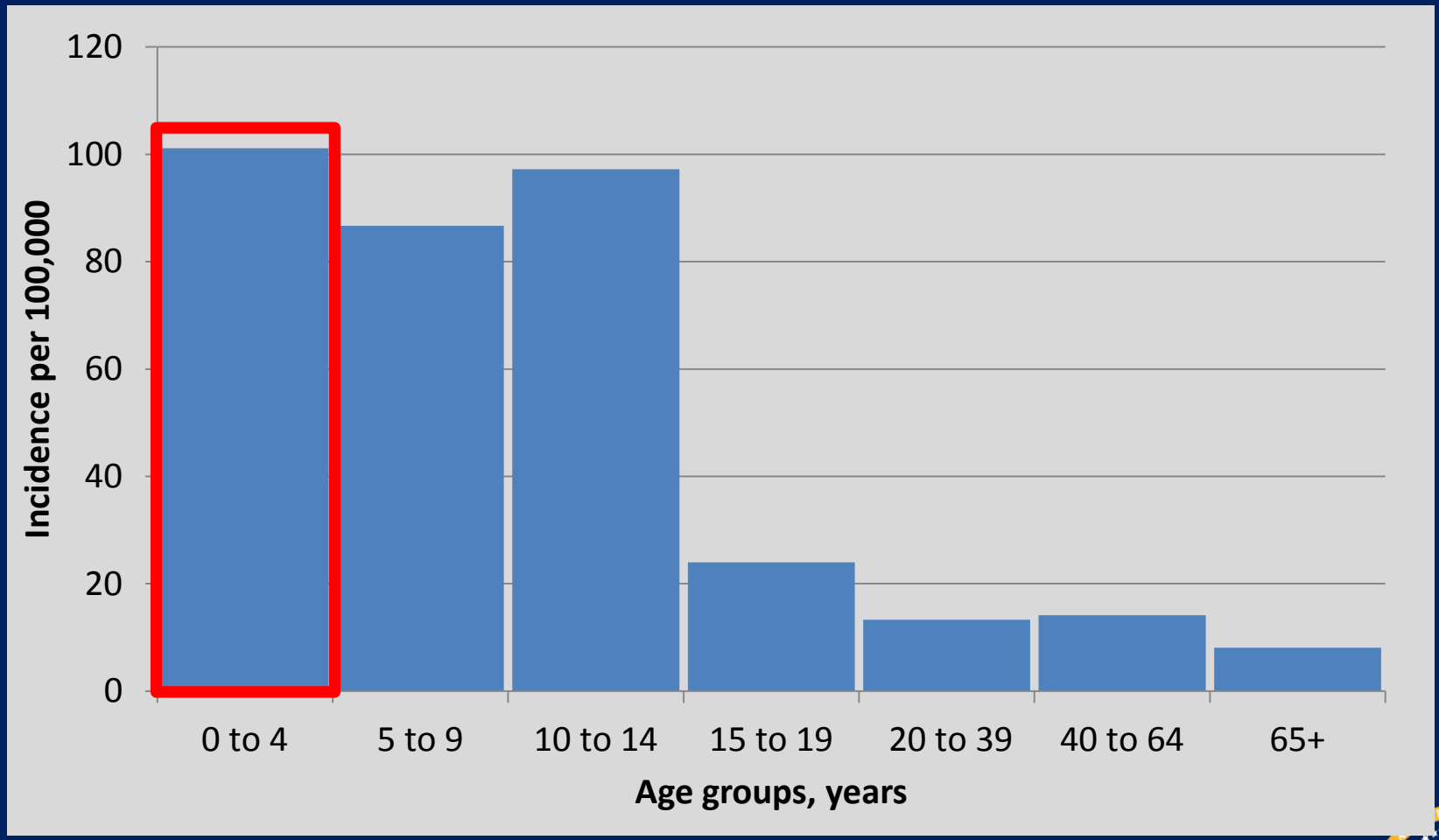
Incidence of Pertussis by Age group, 2012



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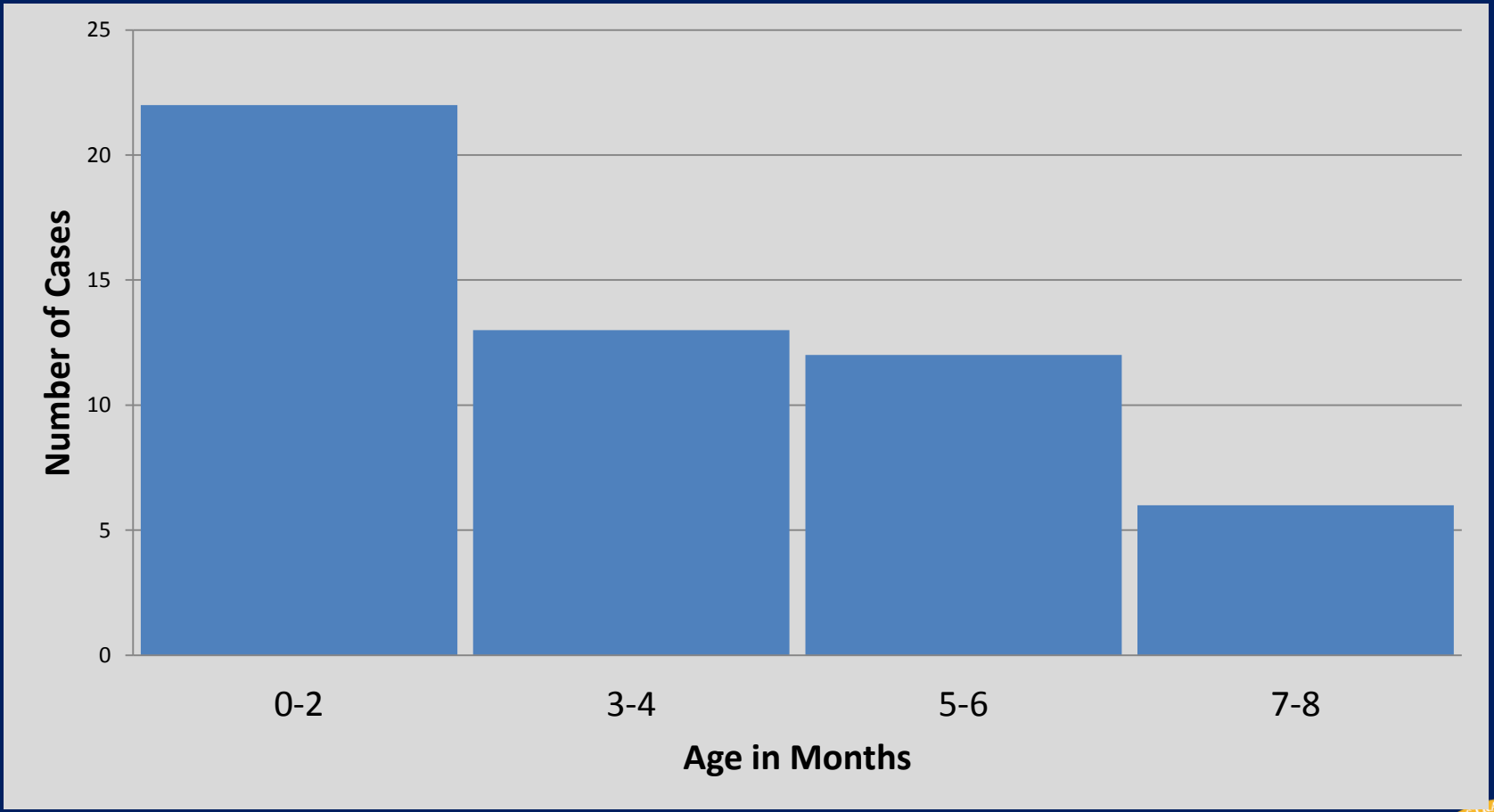
Number of Cases of Pertussis by Age in Months, 2012



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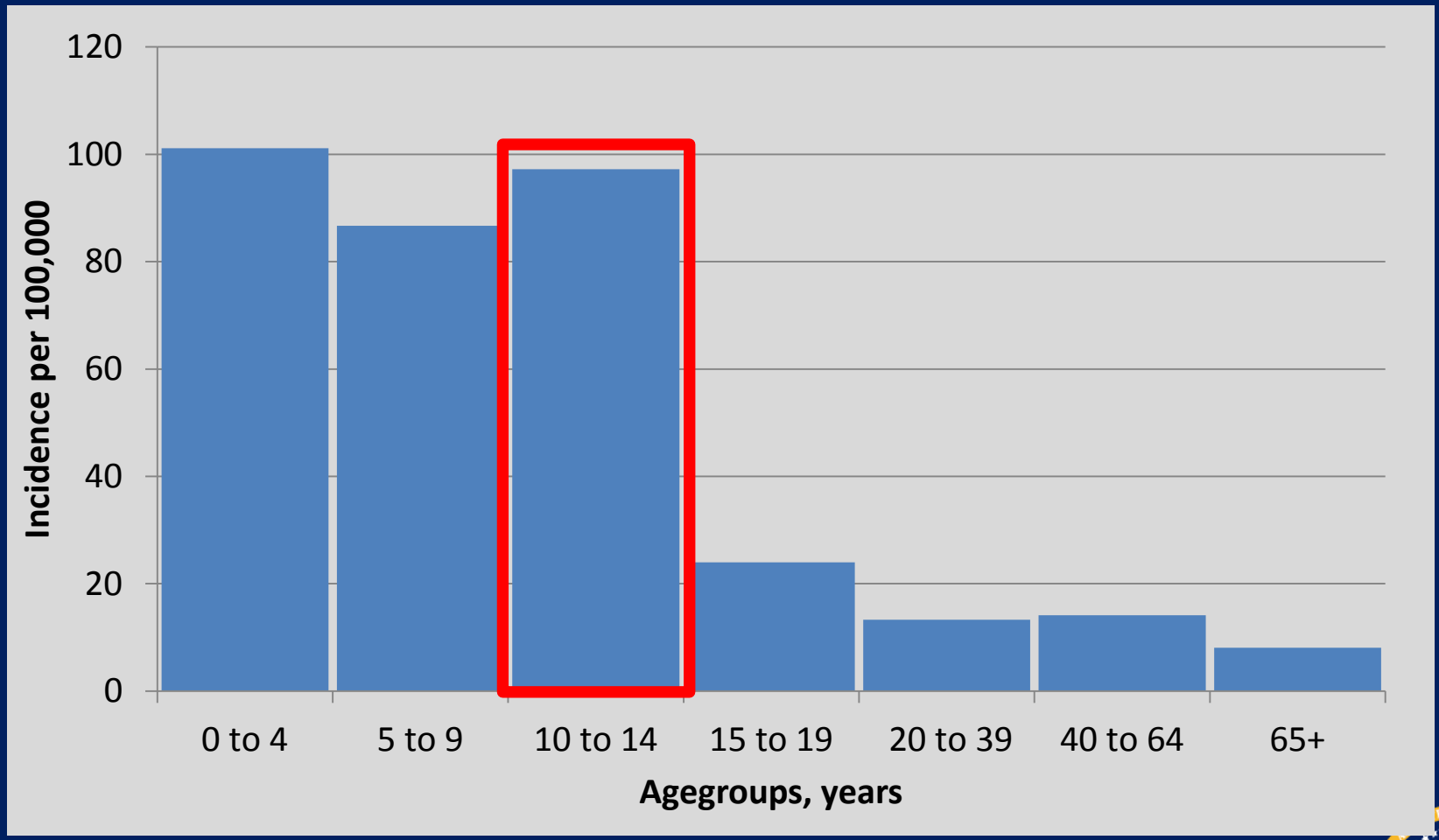
Incidence of Pertussis by Age group, 2012



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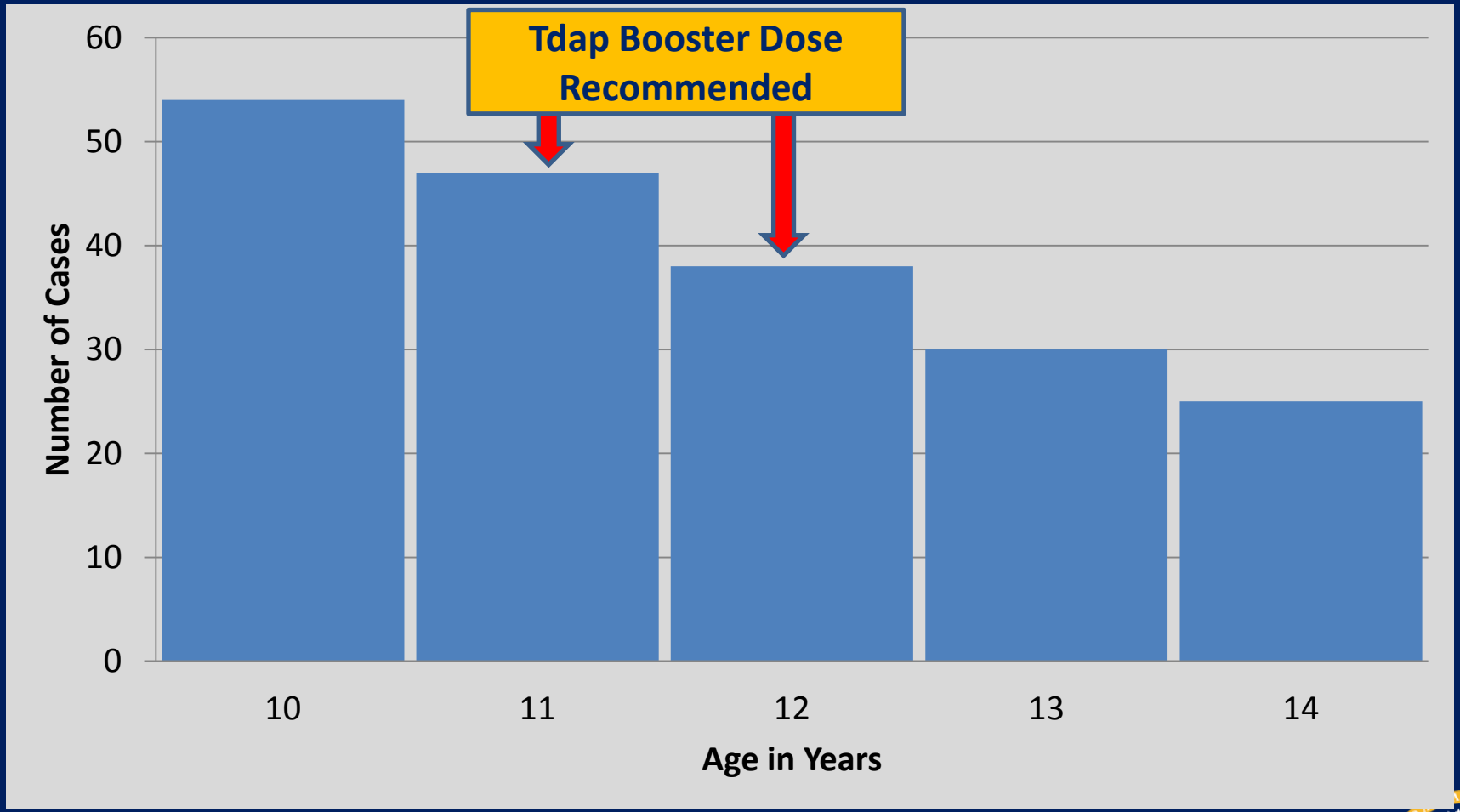
Number of Pertussis Cases for Adolescents, 2012



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Pertussis – Unvaccinated Cases

Age Group (yrs)	% of Unvaccinated Cases
0 to 4	15.7%
5 to 9	5.7%
10 to 19	2.1%
20 to 49	12.3%
50 to 74	20.7%
75+	25%

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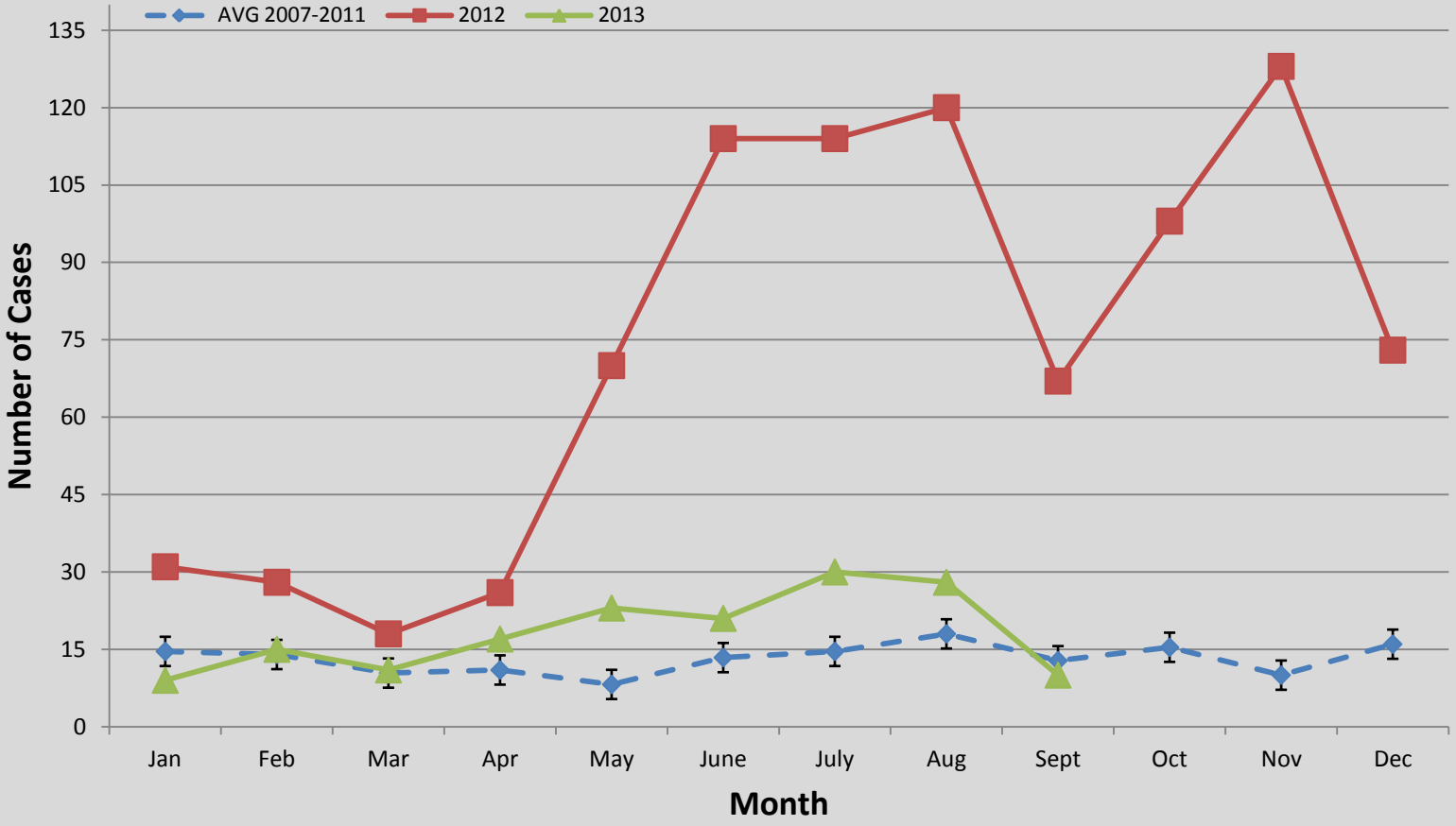
Confirmed and Probable Cases by Month
(Based off MMWR Year)



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Best Practices for Pertussis Testing

- Only test patients with symptoms of pertussis
- Asymptomatic close contacts should not be tested
- Only test patients during the first 3 weeks of cough when bacterial DNA is still present
- Do not test patients who have had >5 days of antibiotics
- Serology has limited usefulness in diagnosing pertussis and cannot be used as laboratory confirmation for surveillance purposes

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Conclusion

- Most counties in the Eastern part of the state were affected
- Most pertussis reported in children younger than 15
- As infants received their doses of DTap at 2, 4, and 6 months the number of pertussis cases decreased
- As adolescents reach 11 and 12 years of age when Tdap is recommended the number of pertussis cases also decreased
- As of January 2013 pertussis cases have returned to baseline levels

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Varicella Outbreak Associated with Unvaccinated Children

Amie Worthington, Medical Investigator

Kansas Department of Health and Environment

Varicella (Chicken Pox)

- **Highly contagious respiratory disease**
- **Spread by direct person-to-person contact from infected respiratory tract secretions**
- **Also may occur by respiratory contact with airborne droplets**
- **Vaccine preventable**

American Academy of Pediatrics. N.d. Photograph. http://www.cdc.gov/chickenpox/about/photos.htmlWeb. 16 Sep 2013. <http://www.vaccineinformation.org/photos/variaap001.jpg>.

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Varicella Outbreak

- **April 2013, the Pottawatomie County Health Department notified the Kansas Department of Health and Environment (KDHE) of six cases of varicella within one household**

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Varicella Outbreak

- Additional cases were identified and epi-linked to a church the ill family attended
- An outbreak investigation was initiated with the local health departments
  - Ill children were excluded from school for six days after rash onset or until the rash lesions were crusted
  - Susceptible contacts were either vaccinated within 24 hours or excluded for 21 days after the onset of the last reported illness
- Outbreak of varicella – five or more cases in a specific setting that are epi-linked

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Methods

- **Reported cases of varicella were interviewed to assess:**
  - **Onset date**
  - **Transmission setting**
  - **Severity of rash**
  - **Vaccination status**
- **Contacts were identified to assess vaccination status**

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Results

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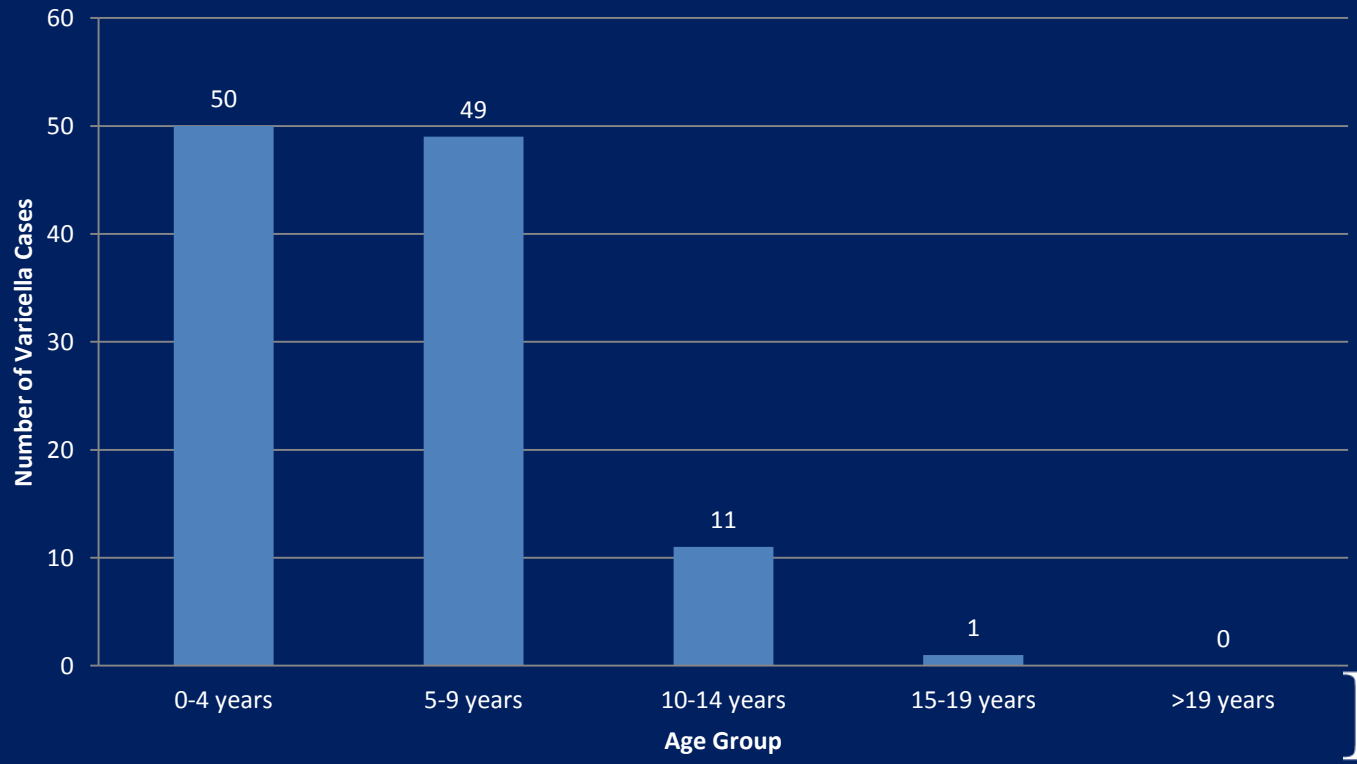
Number and Age Range of Cases

- **111 cases identified**
  - **Ages range from less than one year to 15 years of age**
    - **Median 5 years**



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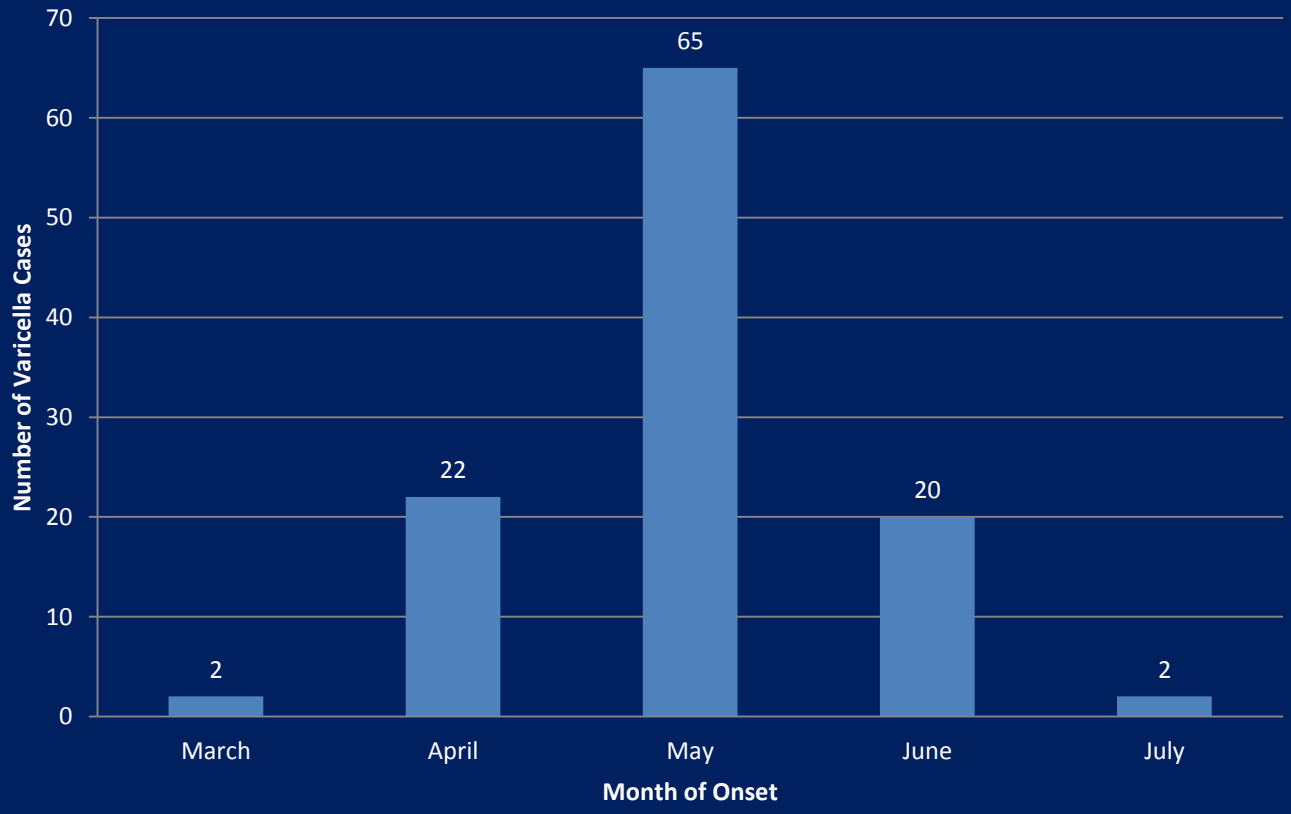
Month of Onset Illness by Number of Cases

- **Onset of illness ranged from March 26, 2013 to July 18, 2013.**



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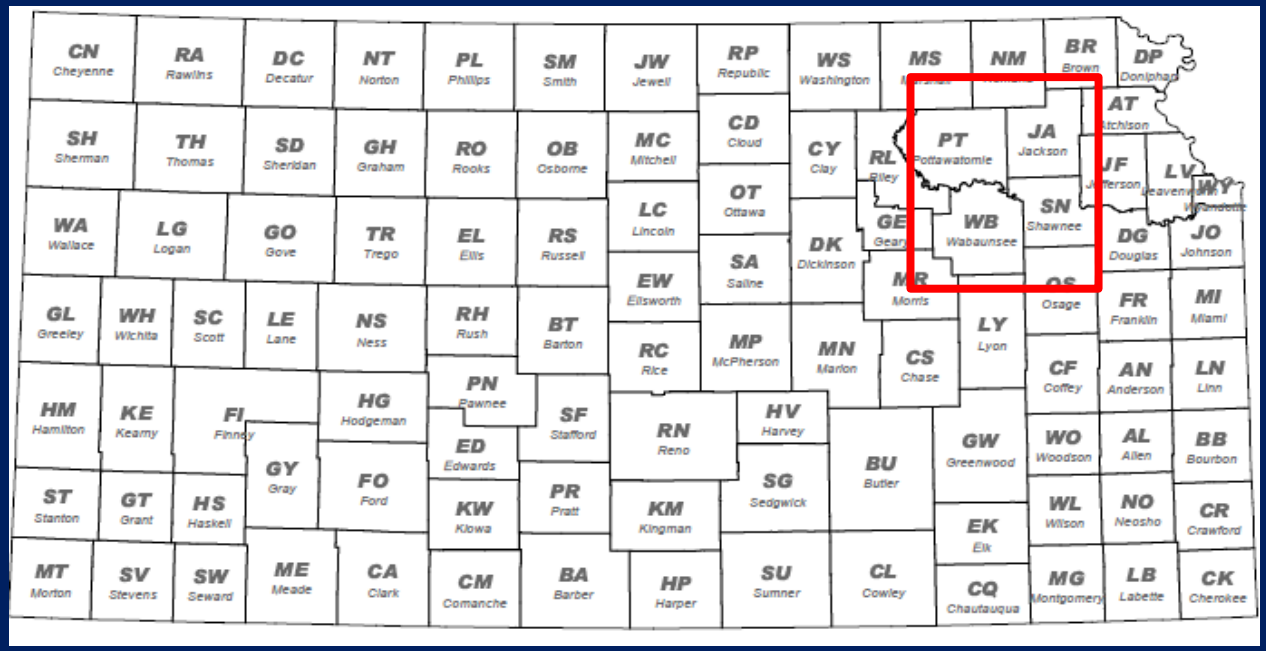
County of Residence

- Cases were identified from 4 counties
  - Pottawatomie - 73 (66%)
  - Wabaunsee - 22 (20%)
  - Shawnee - 11 (0.1%)
  - Jackson - 5 (0.05%)
- 56 cases were associated with a school



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Vaccination Status

- **103 (93%) of 111 cases were unvaccinated**
  - **91 parents either reported refusing vaccine or claimed religious exemption**
  - **7 were too young to be vaccinated**
  - **3 reported history of disease**
  - **2 had unknown vaccination status**

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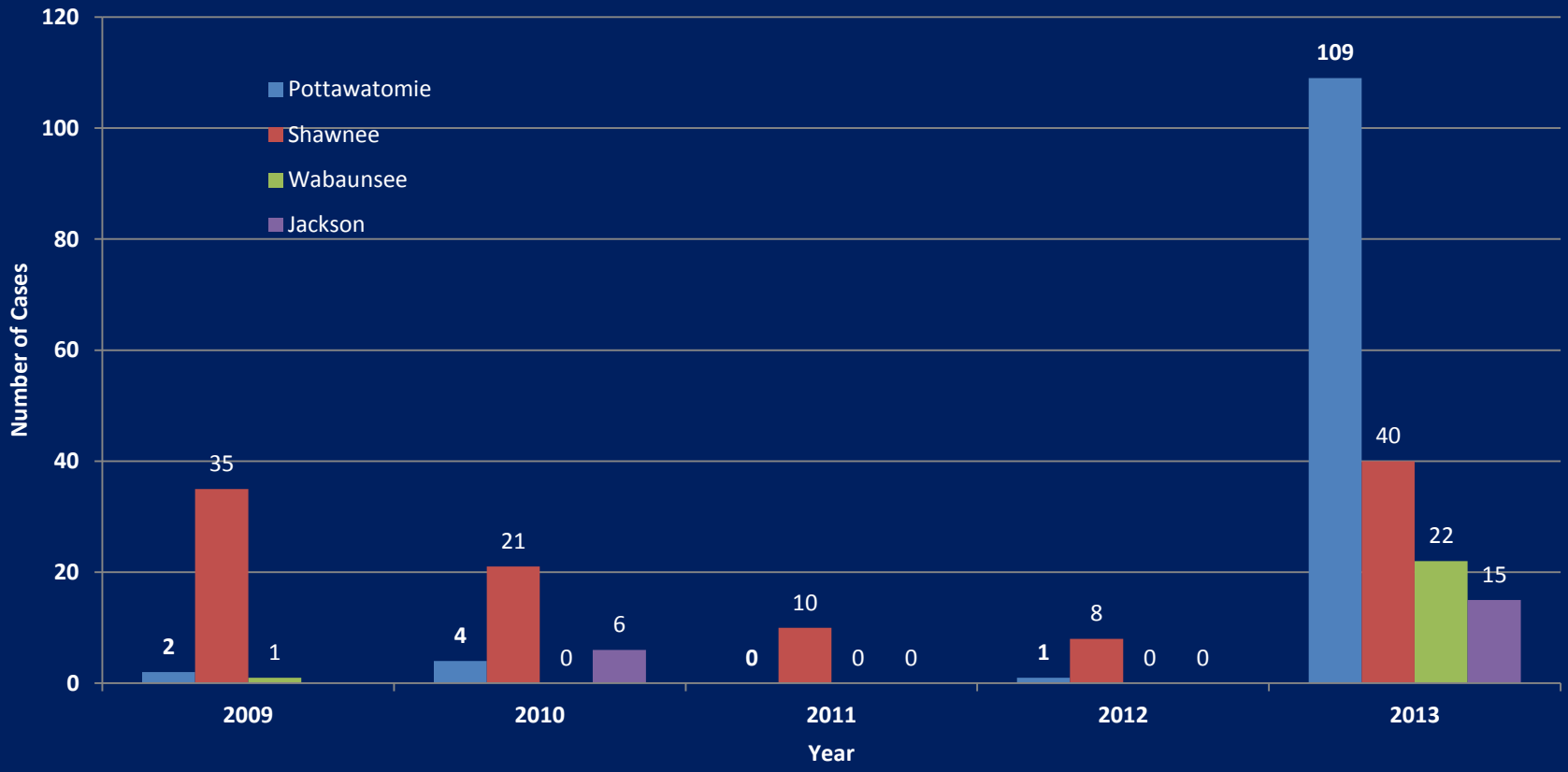
Varicella Cases by Year



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Conclusions

- One of the largest varicella outbreaks KDHE has investigated
- Low estimate of actual cases
- Difficult to control
- Most cases under the age of 10
- Highly unvaccinated community

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Questions

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Influenza Surveillance Update

Amie Worthington, Influenza Surveillance Coordinator

Kansas Department of Health and Environment

Objectives

- **Describe influenza surveillance in Kansas.**
- **Discuss the quadrivalent and vaccines produced via non-egg based technologies.**

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Influenza Surveillance

Haemophilus influenza , invasive disease
Hantavirus Pulmonary Syndrome
Hemolytic uremic syndrome, postdiarrheal
Hepatitis, viral (acute and chronic)
Hepatitis B during pregnancy
Human Immunodeficiency Virus (HIV) (includes Viral Load Tests)
Influenza deaths in children <18 years of age
Legionellosis
Leprosy (Hansen disease)
Listeriosis
Lyme disease
Malaria

Outbreaks, unusual occurrence of any disease, exotic or newly recognized diseases, and suspect acts of terrorism should be reported within 4 hours by telephone to the Epidemiology Hotline: 877-427-7317

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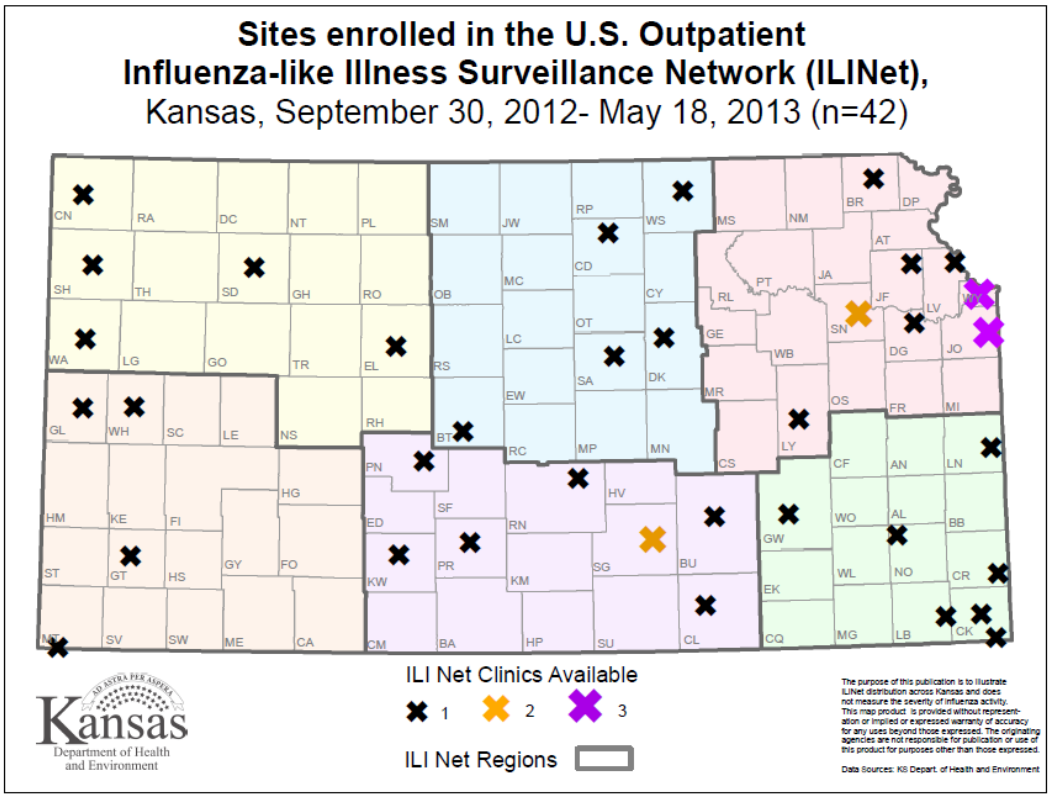
ILINet

- Tracks Influenza-Like Illness (ILI) in participating outpatient settings
- ILI Definition: Fever (>100ºF) **AND** cough and/or sore throat



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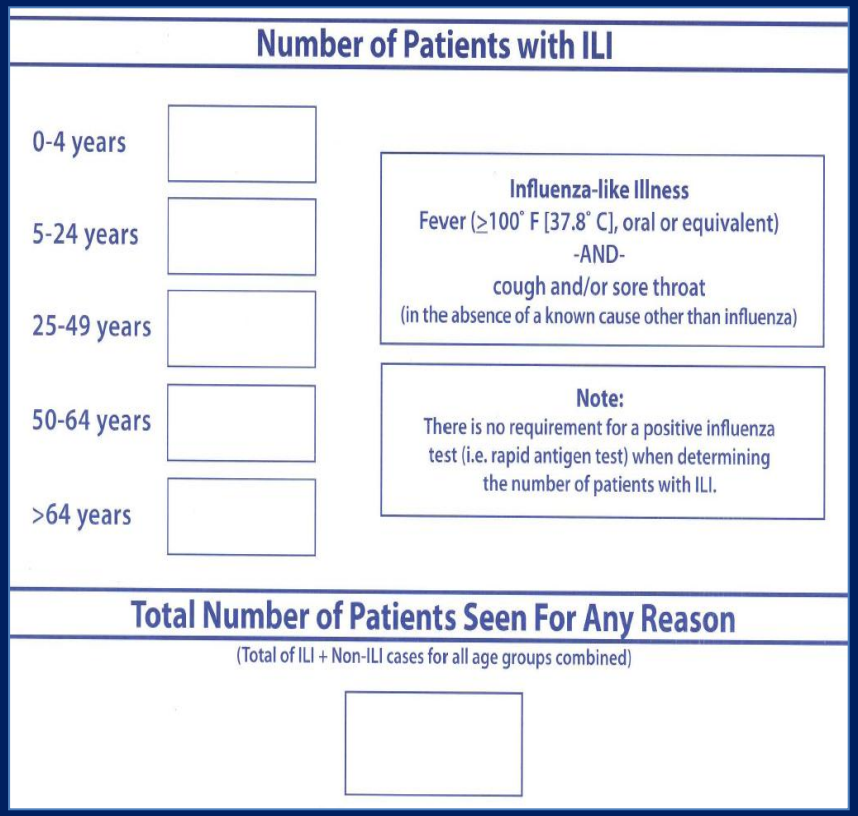
ILINet

- Sites report weekly
- Reports include ILI cases and total number of patients seen



Number of Patients with ILI

0-4 years	
5-24 years	
25-49 years	
50-64 years	
>64 years	

Influenza-like Illness
Fever (≥100° F [37.8° C], oral or equivalent)
-AND-
cough and/or sore throat
(in the absence of a known cause other than influenza)

Note:
There is no requirement for a positive influenza test (i.e. rapid antigen test) when determining the number of patients with ILI.

Total Number of Patients Seen For Any Reason

(Total of ILI + Non-ILI cases for all age groups combined)

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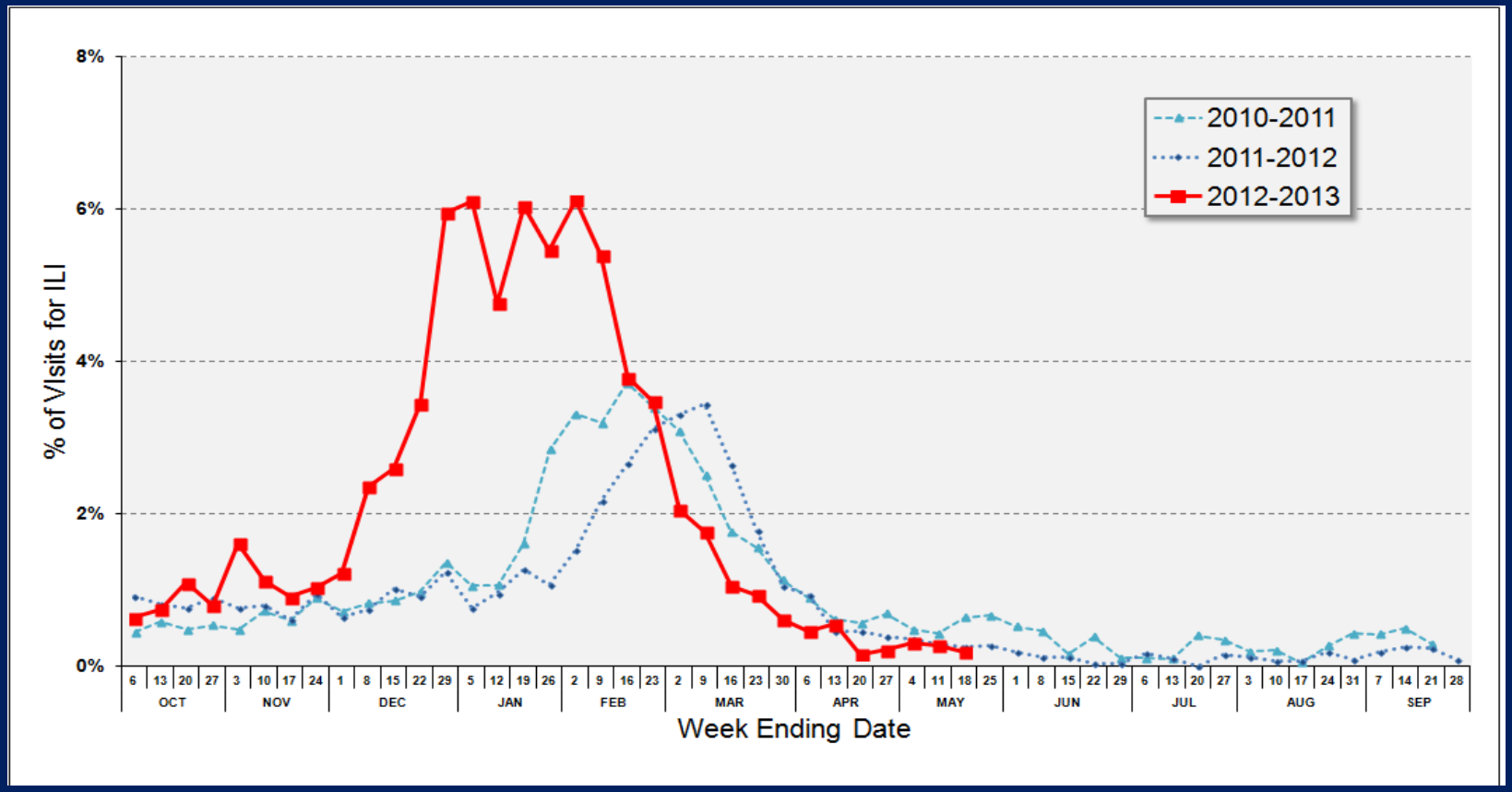
ILINet

Percentage of visits for influenza-like illness



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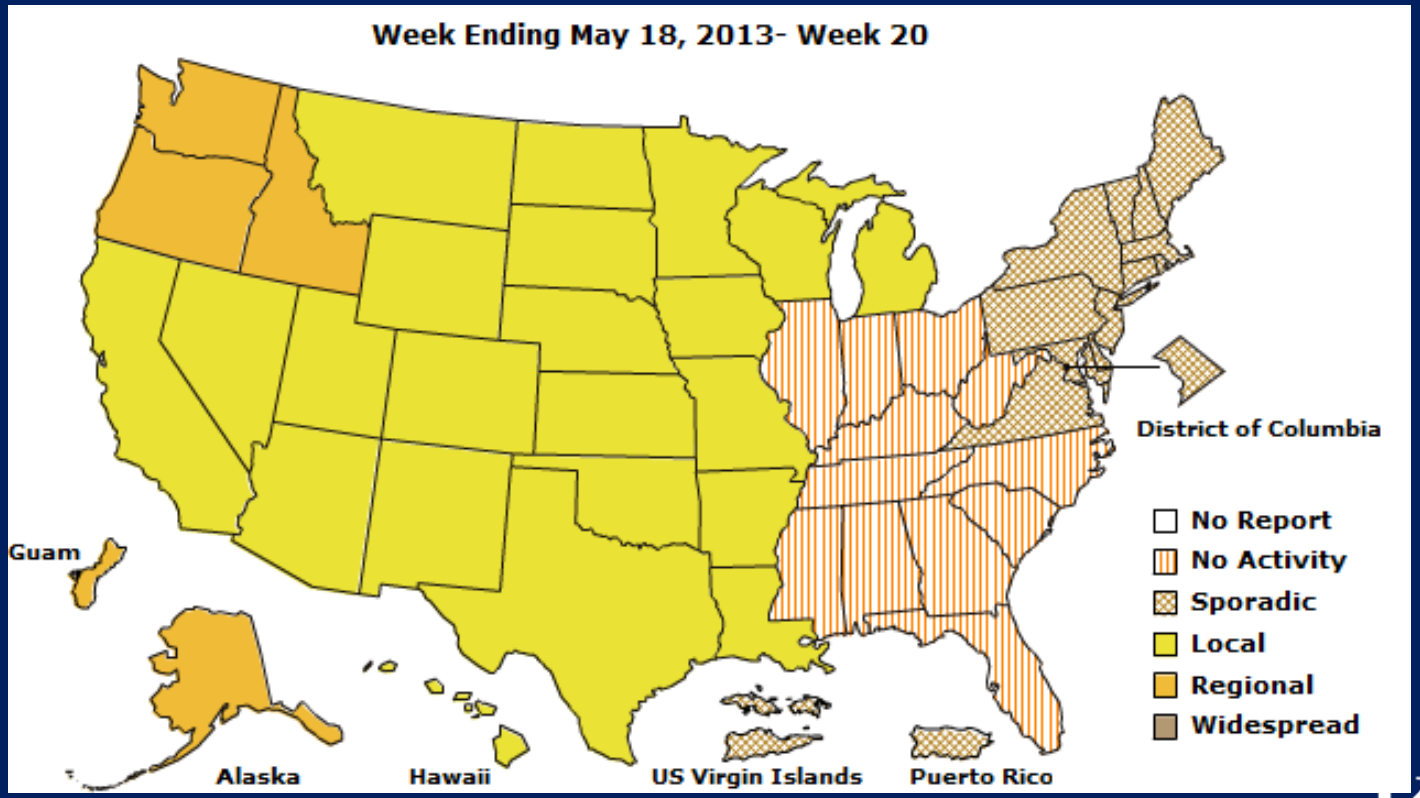
ILINet

- Kansas reports data to CDC
- Geographic spread of reported ILI



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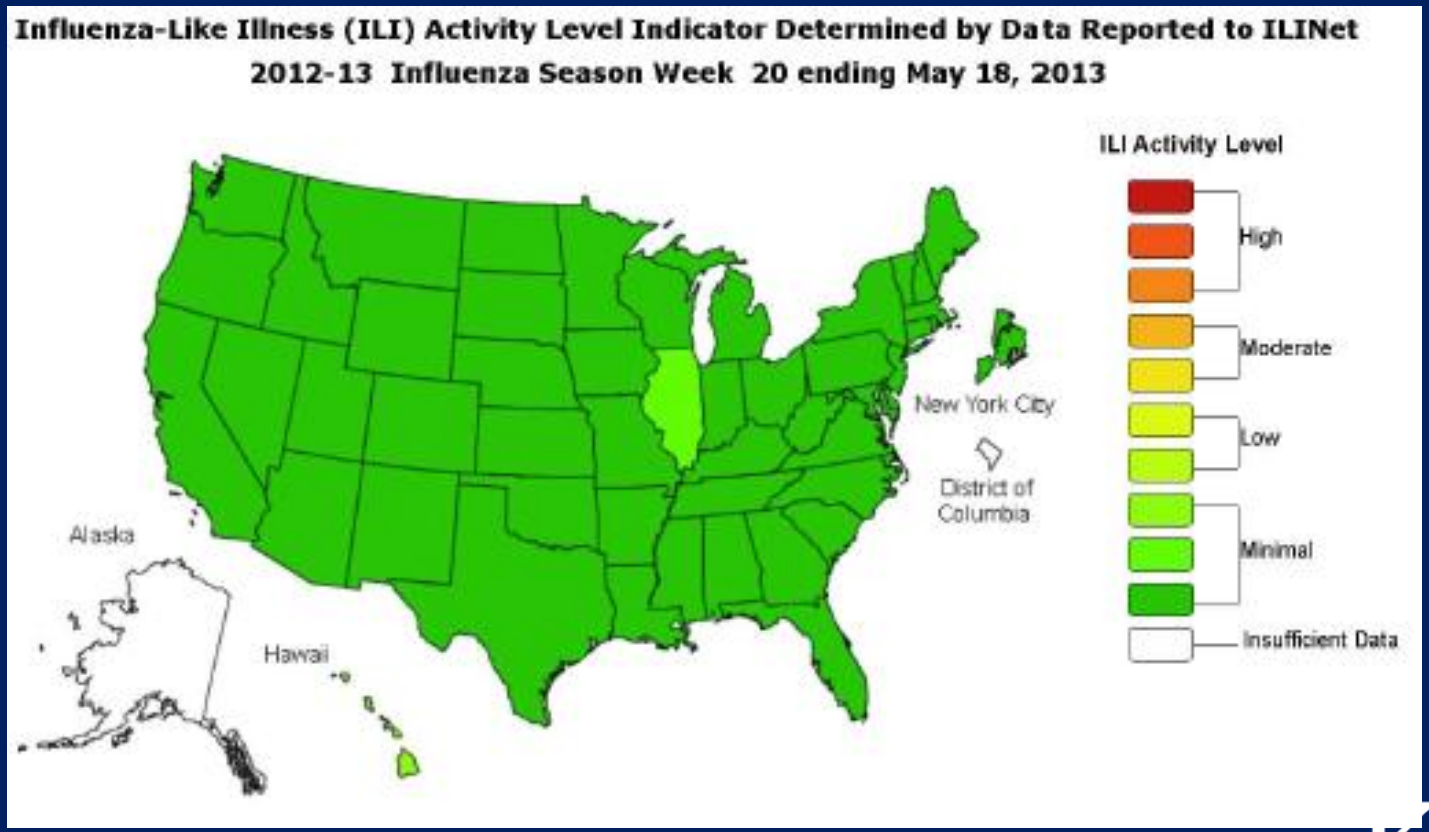
ILINet

- Kansas reports data to CDC
- Intensity map of reported ILI



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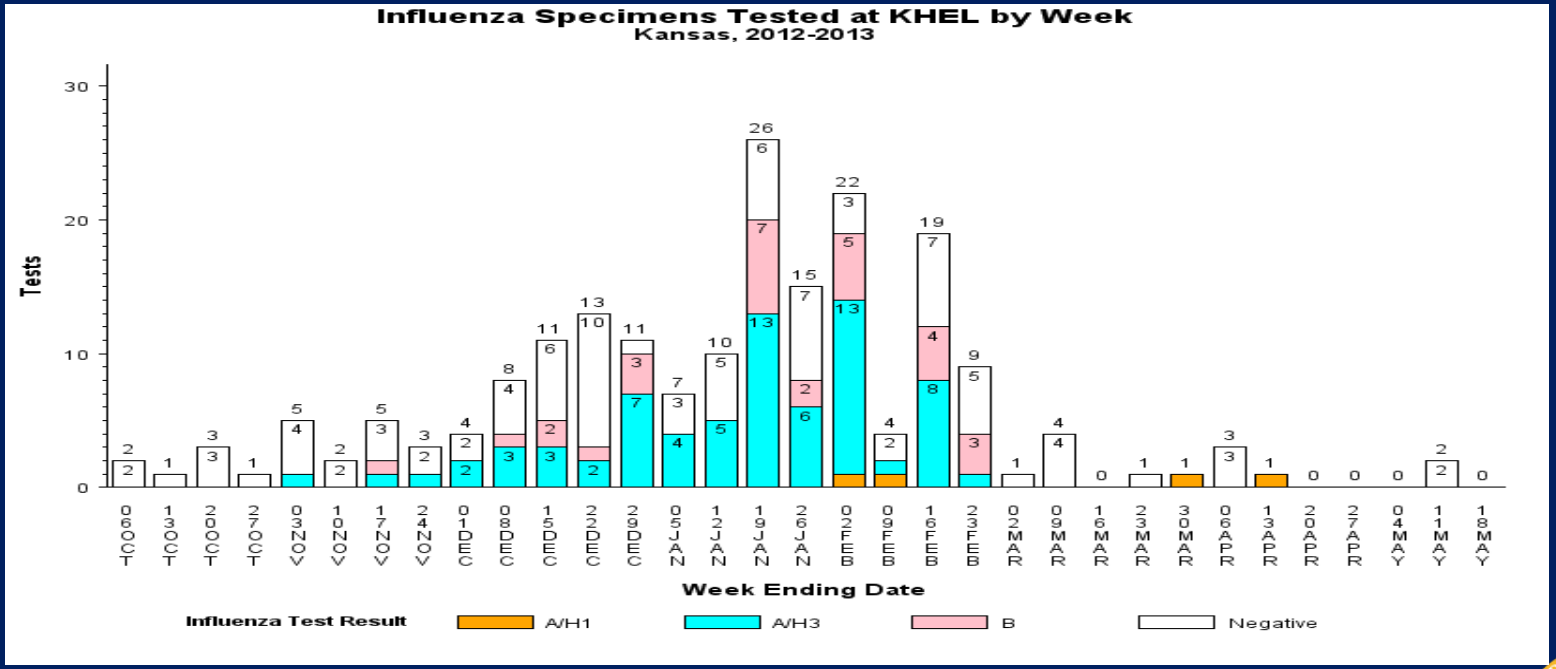
Laboratory Surveillance

- ILINet sites submit 1 specimen per week to the Kansas Health and Environmental Laboratories (KHEL)
  - NP or Nasal
  - KHEL performs PCR testing
  - Determines Type (A/H1, A/H3, or B)



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Laboratory Surveillance

- **PCR negative specimens were tested with the Luminex assay**
- **The Luminex assay can probe for 12 viral targets per specimen:**

•Influenza A
•Influenza A, Subtype H1
•Influenza A, Subtype H3
•Influenza B
•Respiratory Syncytial Virus, Subtype A
•Respiratory Syncytial Virus, Subtype B

•Parainfluenza 1
•Parainfluenza 2
•Parainfluenza 3
•Human Metapneumovirus
•Rhinovirus
•Adenovirus

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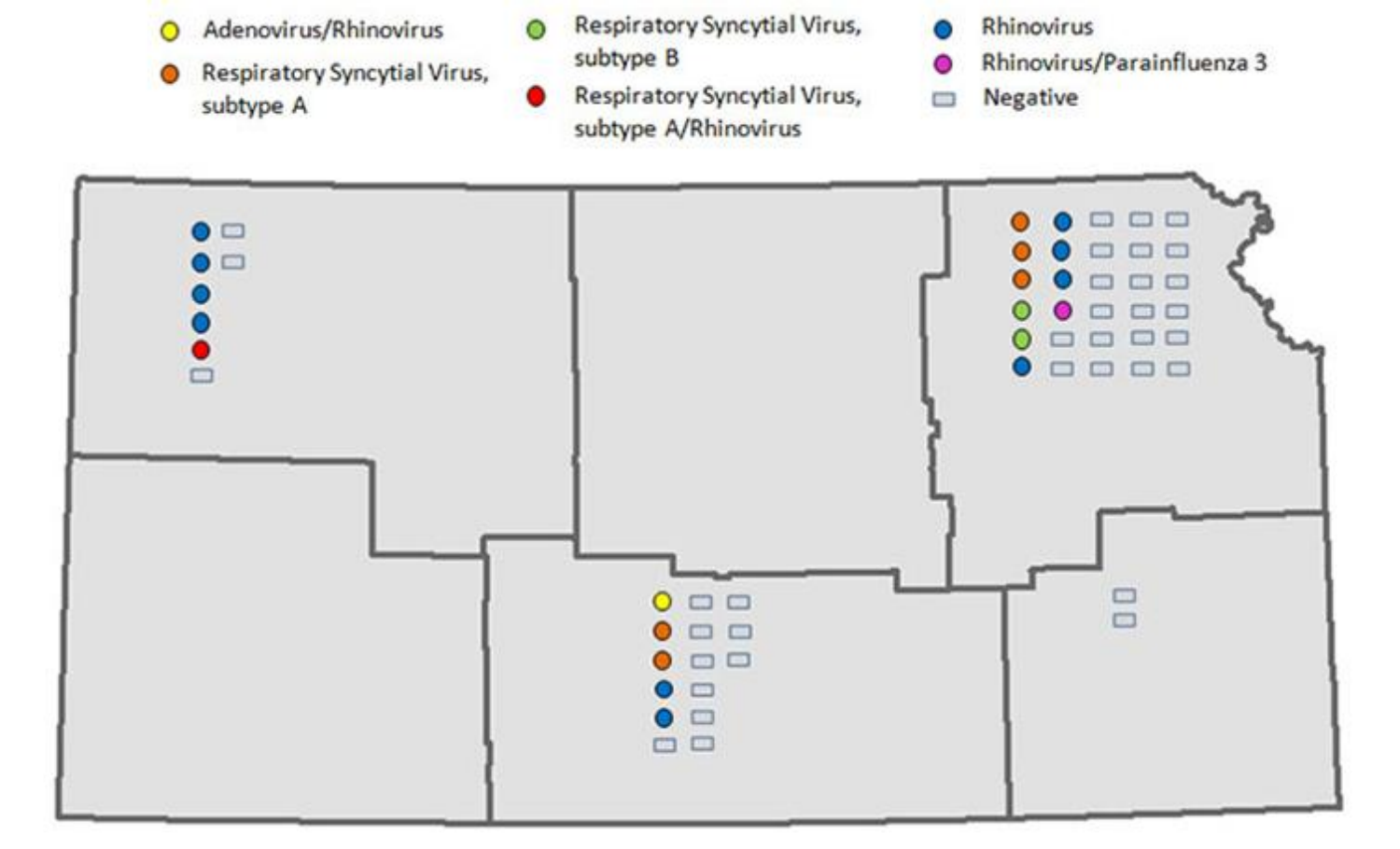
Laboratory Surveillance



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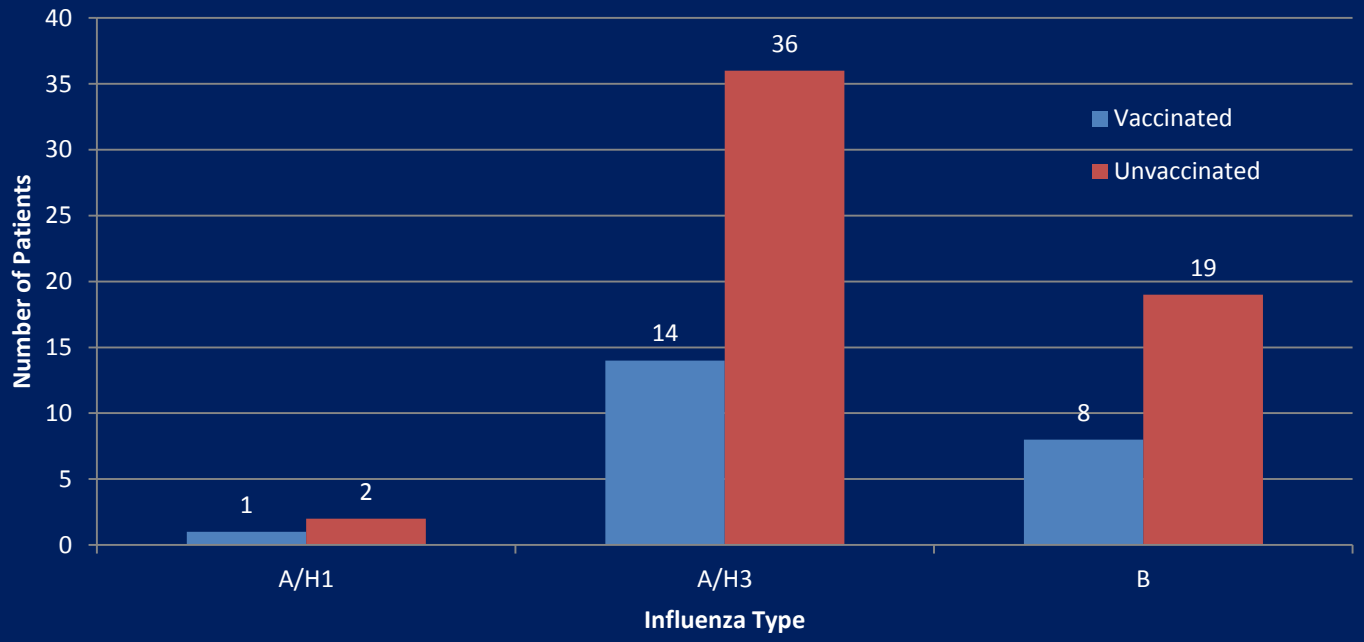
2012-2013 Vaccine Effectiveness

- **23 of 80 patients with known vaccination status were vaccinated and tested positive for influenza**



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2013-2014 Influenza Vaccine

- **Trivalent vaccine influenza virus:**
  - **A/California/7/2009 (H1N1)pdm-09-like virus;**
  - **A/Victoria/361/2001 (H3N2)-like virus;**
  - **B/Massachusetts/2/2012-like virus.**

- **Quadrivalent vaccine includes additional B virus:**
  - **B/Brisbane/60/2008-like virus.**

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Vaccines Produced via Non-Egg Based Technologies

- A trivalent influenza vaccine approved by the FDA for use in adults ages 18 to 49
- Does not use the influenza virus or chicken eggs in its manufacturing process

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Questions

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Immunization Toolkit:
Influenza and Pneumococcal Vaccination of Residents in Long-Term Care Facilities (LTCFs)

Chelsea Raybern, Epidemiologist

Kansas Department of Health and Environment

Objectives

- **Describe reasons for developing toolkit**
- **Discuss contents of toolkit**
- **Discuss timeline of development**

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Influenza - Epidemiology

- **Flu season occurs early as October to late as May**
- **Affects 5-20% U.S. population, affects more than 50% of individuals in closed communities**
- **>200,000 people hospitalized for flu-related complications annually**
  - **More than 60% occur in persons 65 years and older**
- **From 1976-2006, # of deaths ranged from 3,000 to 49,000**
  - **Approximately 90% occur in persons 65 years and older**

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Influenza – Vaccine Effectiveness

- **Vaccine has shown to be:**
  - **50-60% effective in preventing flu-related hospitalizations**
  - **80% effective in preventing flu-related deaths**

- **Vaccine prevented 77% of hospitalizations in adults ≥50 years of age during 2011-2012 flu season**

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Pneumococcal Disease - Epidemiology

- **Occurs year round**

- **Kills more people in U.S. than all other vaccine-preventable diseases (VPD) combined and highest mortality occurs among elderly and people with underlying medical conditions**

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Pneumococcal Disease - Epidemiology

- **Causes severe infections:**
  - **Pneumonia – more than 900,000 cases annually; 400,000 hospitalizations, 5-7% result in death**
  - **Bacteremia – more than 12,000 cases annually; 15% result in death**
  - **Meningitis – roughly 3,000 cases annually; 10% result in death**

- **Adults account for 95% of pneumococcal deaths in U.S.**

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Pneumococcal Disease – Vaccine Effectiveness

- **Pneumococcal polysaccharide vaccine (PPSV23) has shown to be 50-80% effective in preventing invasive pneumococcal infection in immunocompetent elderly persons and adults with underlying conditions**

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LTCF Resident Coverage Levels in Kansas

- **Influenza (2011-2012, 2012-2013 flu seasons)**
  - **Kansas average – 76%**
  - **National average – 78%**
  - **Healthy People 2020 (HP2020) objective – 90%**

- **Pneumococcal (October 2011 – March 2013)**
  - **Kansas average – 82%**
  - **National average – 76%**
  - **HP2020 objective – 90%**

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Facility Level Coverage – 2011

- **Influenza**
  - **170 (69%) of 248 facilities had <90% coverage**
- **Pneumococcal**
  - **164 (64%) of 255 facilities had <90% coverage**

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Toolkit Contents

- **Flu and pneumococcal disease information**
- **Myth/fact sheets**
- **Vaccine information statements (VIS)**
- **Vaccination uptake paper tracking methods**
- **Model language for resident consent and declination forms**
- **Model language for standing orders on vaccination of residents**
- **Outbreak control**

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Delivery and Implementation

- **Provide printed and electronic toolkits**
- **Implement this flu season**
- **Getting the word out through Kansas Health Care Association and Leading Age Kansas**

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Vaccination Coverage Assessments

Chelsea Raybern, Epidemiologist
Elizabeth Lawlor, Advanced Epidemiologist

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ADULT: FOUR-YEAR COLLEGES AND UNIVERSITIES

Full report can be found at:
http://www.kdheks.gov/immunize/download/College_Report_2013.pdf

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Background

- **Objective: to determine current VPD immunization requirements of four-year colleges and universities in Kansas**

- **Kansas has no law regarding immunization requirements for colleges and universities**

- **Kansas Board of Regents Mandate**
  - **"Effective at the start of the 2006-07 academic year, each state university shall have in place policies and procedures requiring that all incoming students residing in student housing be vaccinated for meningitis. Such policies shall include appropriate waiver procedures for those who refuse to take the vaccine."**

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Methods

- **Collected list of four-year colleges/universities**
  - **Excluded specialized schools and satellite schools**
- **Survey developed and administered via telephone**
  - **Nine questions regarding existence of policy, immunizations included in policy, immunizations offered by school, etc.**
  - **Administered to student health services representative OR individual most knowledgeable about immunization policies**
- **Descriptive analysis using SAS® 9.3**

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RESULTS

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Four-Year Colleges and Universities with Immunization Policy

Kansas four-year colleges/universities

25

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Four-Year Colleges and Universities with Immunization Policy

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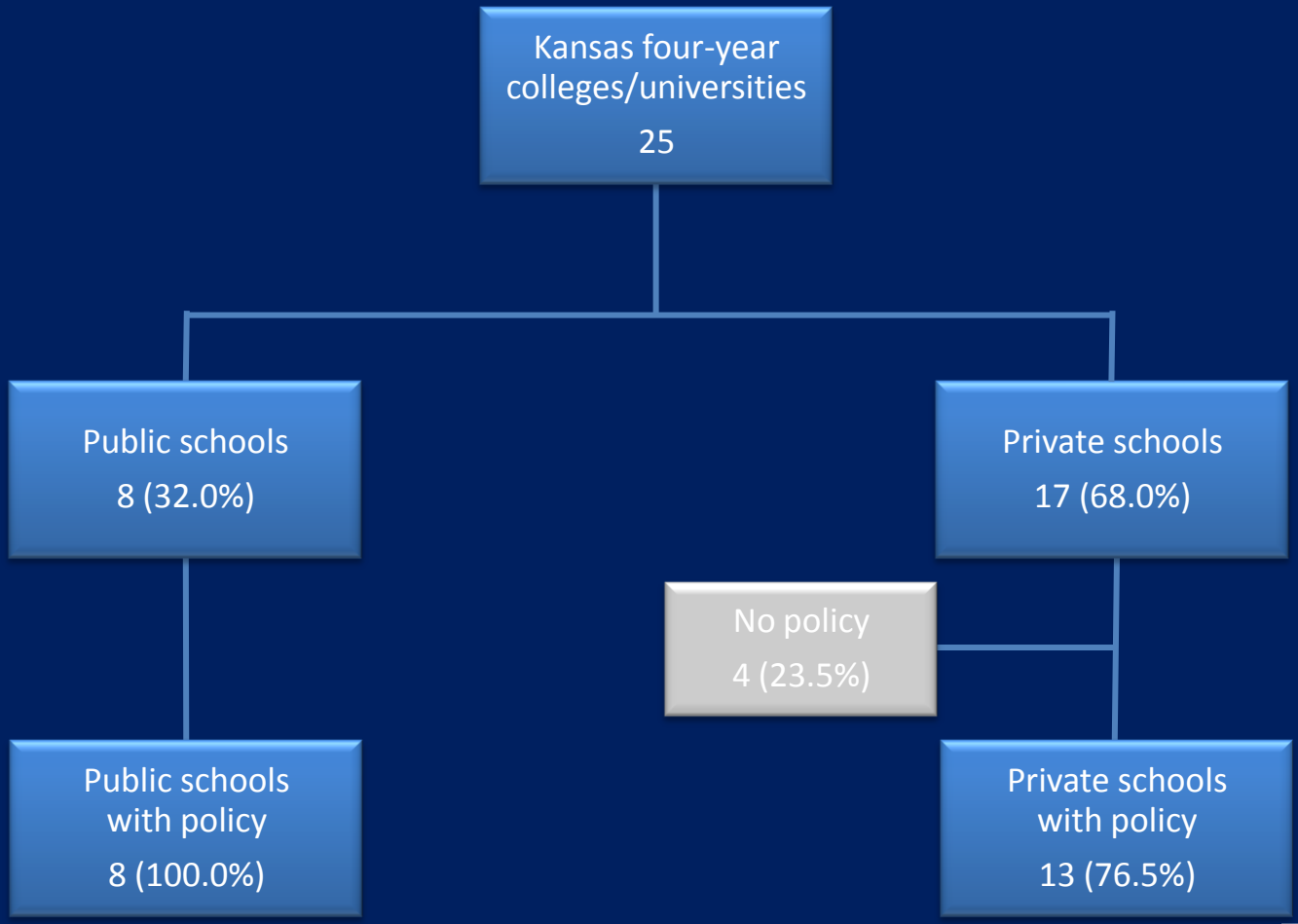
Four-Year Colleges and Universities with Immunization Policy



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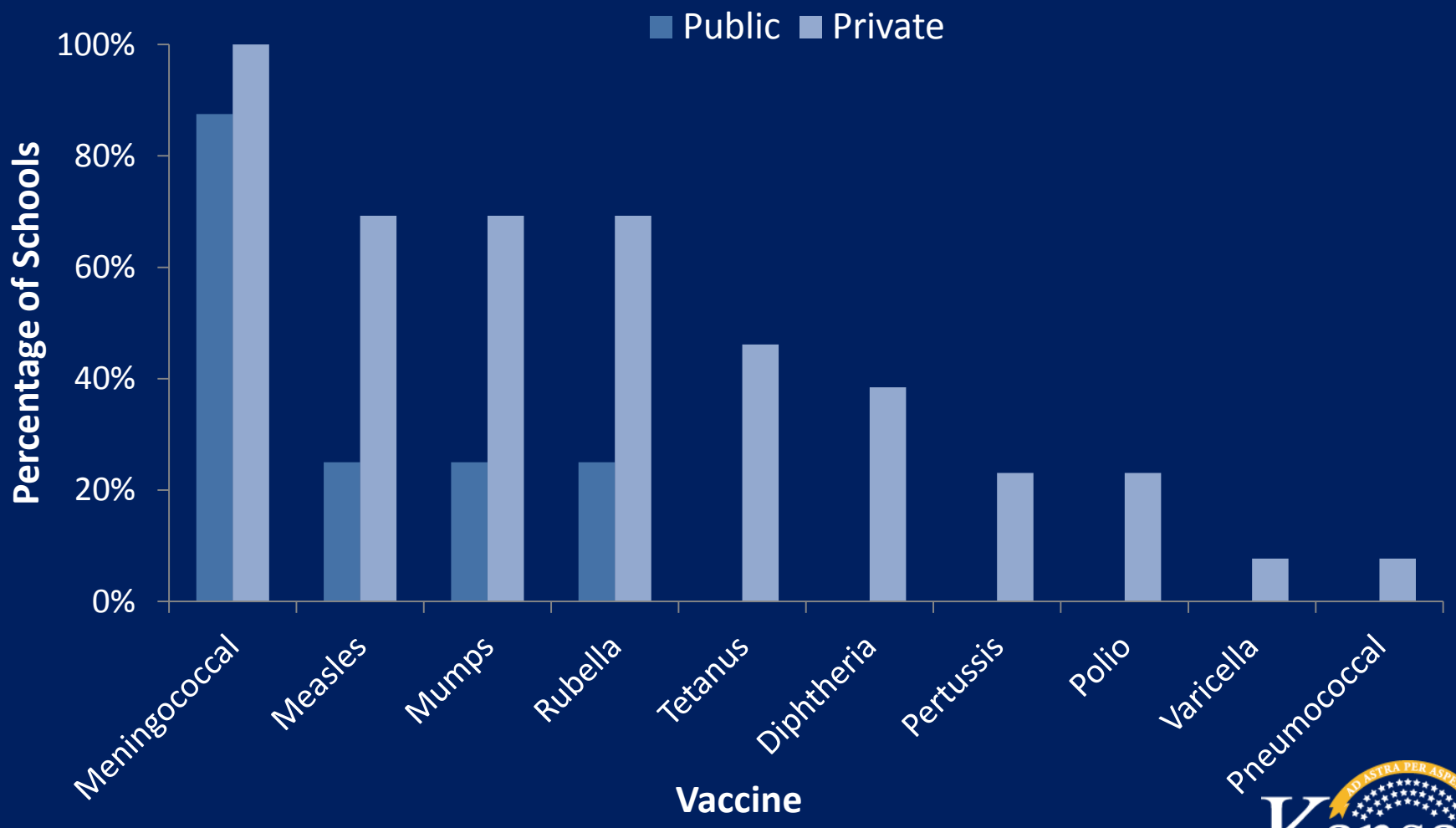
Immunizations Required by Four-Year Colleges and Universities in Kansas*



*No schools require vaccination of influenza, Hepatitis A, Hepatitis B, or HPV

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Time Frame for Compliance

- **Public universities**
  - **8 public schools with immunization policy**
    - **6 (75.0%) require students to be compliant before starting school (when applying to school, before registering for classes, and before moving into on-campus housing)**

- **Private colleges/universities**
  - **13 private schools with immunization policy**
    - **5 (38.5%) require students to be compliant before starting school (when applying to school, before registering for classes, and before moving into on-campus housing)**

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Four-Year Colleges and Universities that Offer Immunizations

Kansas four-year colleges/universities

25

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Four-Year Colleges and Universities that Offer Immunizations

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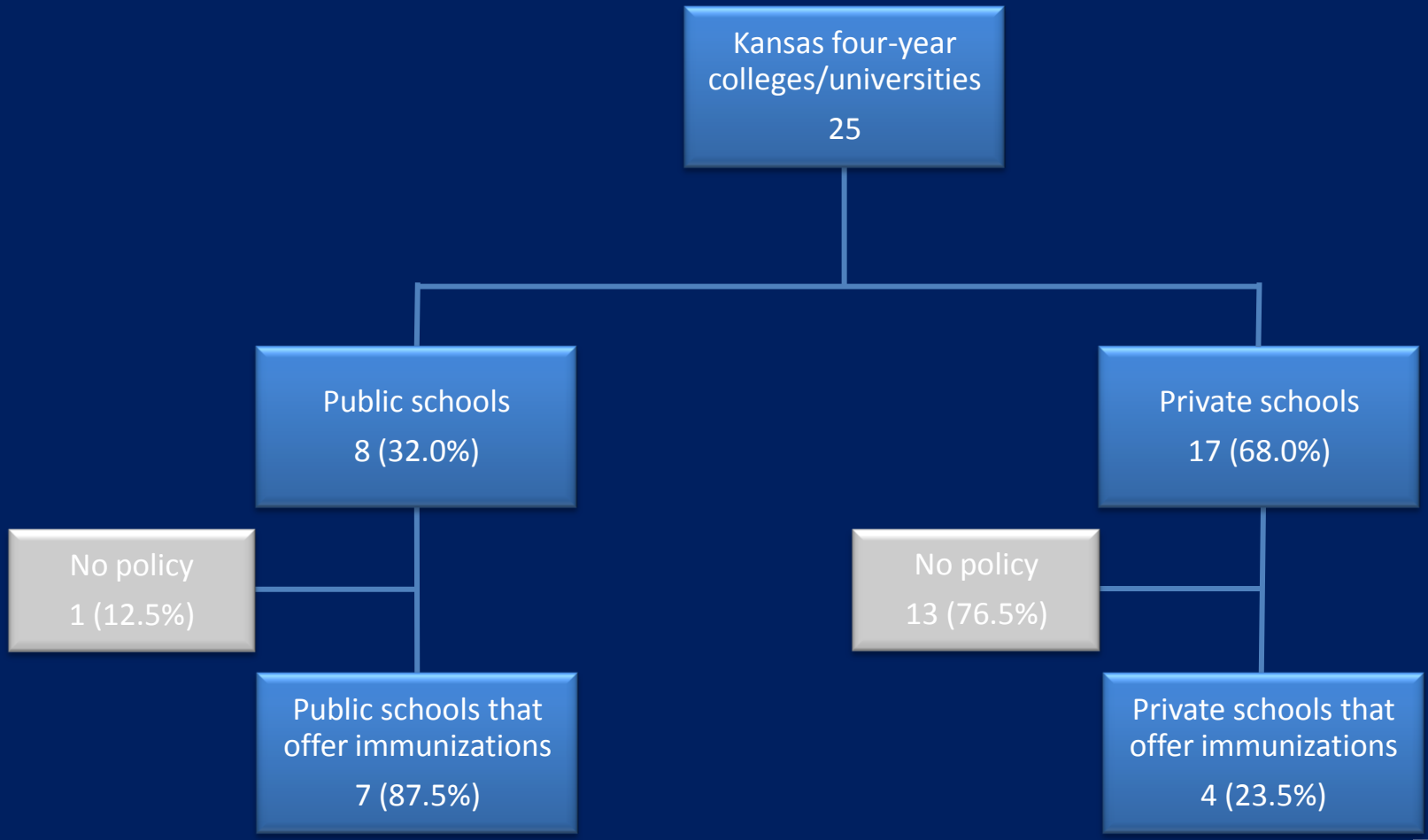
Four-Year Colleges and Universities that Offer Immunizations



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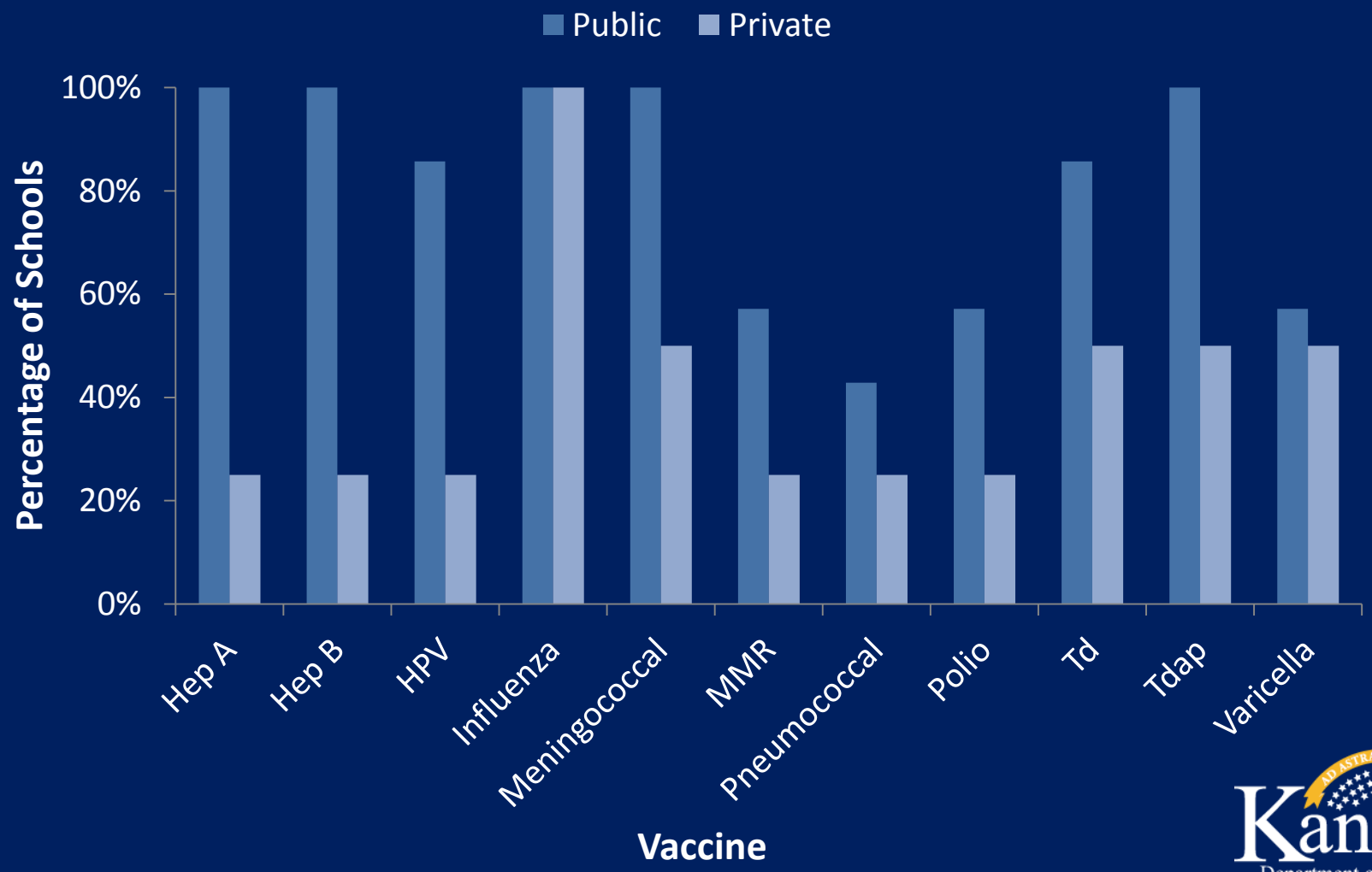
Immunizations Offered by Four-Year Colleges and Universities in Kansas



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Survey Limitations

- **Validity of survey responses unknown**
- **Up-to-date status requirements of students unknown**
- **Only assessed immunization requirements of four-year college and university main campuses**

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CONCLUSIONS

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Overall

- **>80% of four-year colleges/universities in Kansas have immunization policy**
- **~50% require immunization against more than one VPD**
- **~50% require compliance before starting school**
- **More institutions do not offer immunizations than those that do**

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Public vs. Private

- **Larger proportion of public institutions have immunization requirement**
- **Larger proportion of private require immunization against multiple diseases**
- **Larger proportion of public require compliance before start of school**
- **Larger proportion of public offer immunizations to students**

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ADOLESCENT: 6TH, 7TH, AND 8TH GRADE STUDENTS

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Background

- **Objective: evaluate 6th, 7th, and 8th grade students in Kansas that are up-to-date on required and recommended vaccinations**

- **Immunization goals for adolescents by 13-15 years of age – HP2020:**
  - **80% coverage for 1 Tdap dose**
  - **90% coverage for 2 varicella doses (exclude those with disease history)**
  - **80% coverage for 1 meningococcal conjugate dose**
  - **80% coverage for 3 human papillomavirus (HPV) doses**

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Background

- **Kansas required vaccinations:**

6th grade

- Single dose of varicella (or history of disease)

7th grade

- Two doses of varicella (or history of disease)
- Single dose of Tdap

8th grade

- Two doses of varicella (or history of disease)
- Single dose of Tdap

- **Recommended vaccines:**
  - Initial dose of MCV4 for 11 to 12 year-olds
  - Three doses of HPV for 11 to 12 year-olds

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Methods

- **Survey sent to all schools with 6th, 7th, and/or 8th grades**
  - **Number of students with up-to-date immunizations**
  - **Number of students with exemptions**

  ***If school used WebIZ, they did not have to complete survey**
- **Sample of schools with 6th, 7th, and/or 8th grades to validate schools responses**
- **Analysis using SAS® 9.3**

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RESULTS

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6th,7th, and 8th Grade Schools in Kansas

Schools that responded

499 of 588 (85%)

Schools that responded

421 of 507 (83%)

Schools that responded

417 of 496 (84%)

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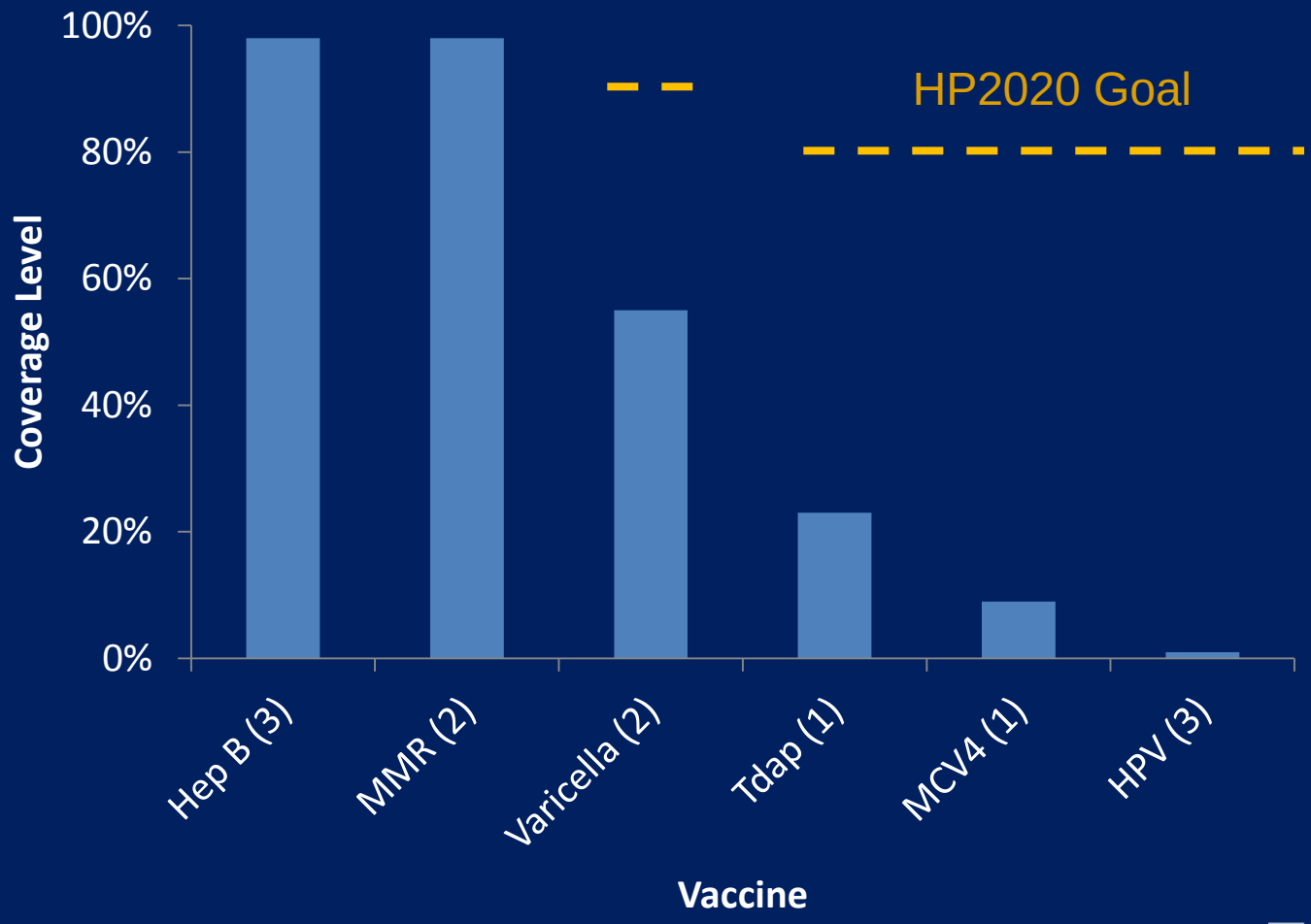
6th Grade Up-to-Date



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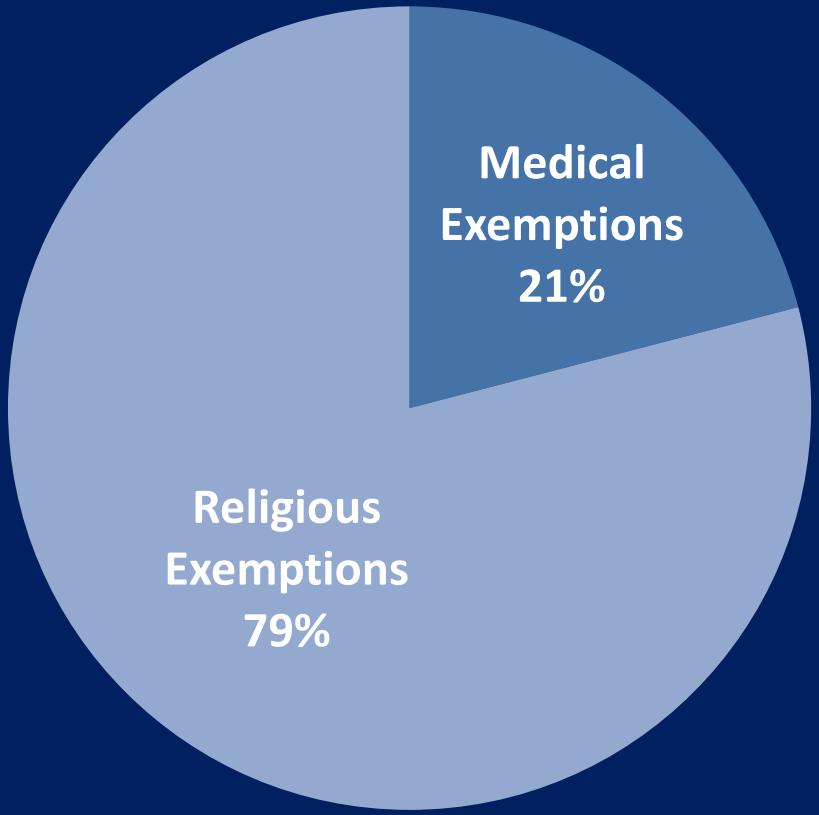
6th Grade Exemptions

Total number of exemptions: 315 (1%)



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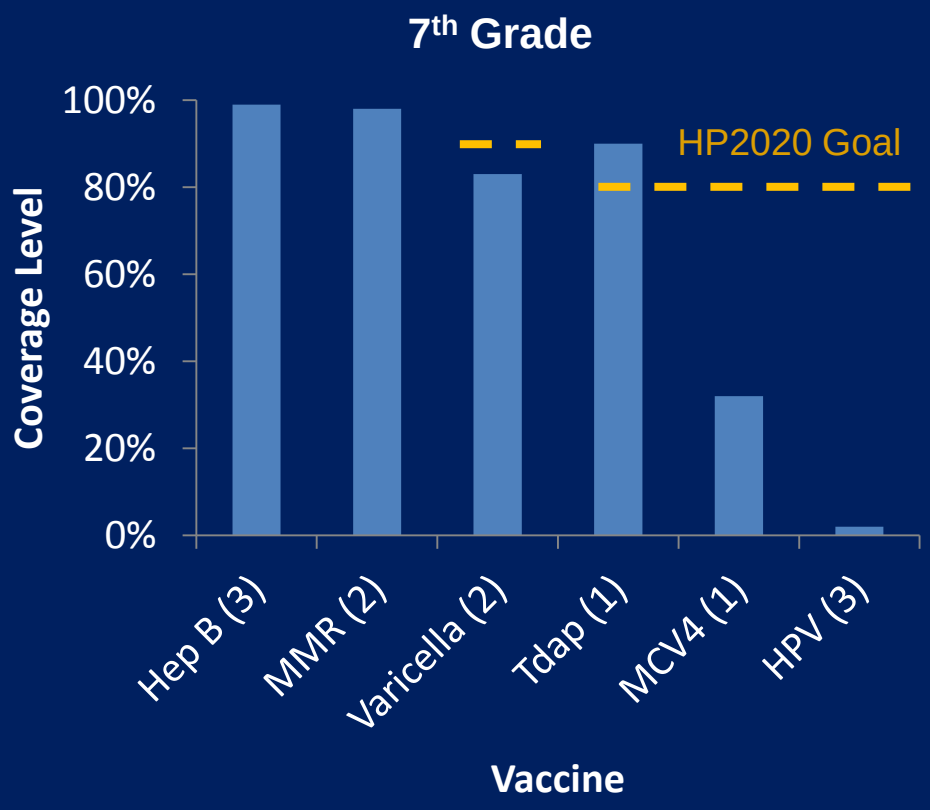
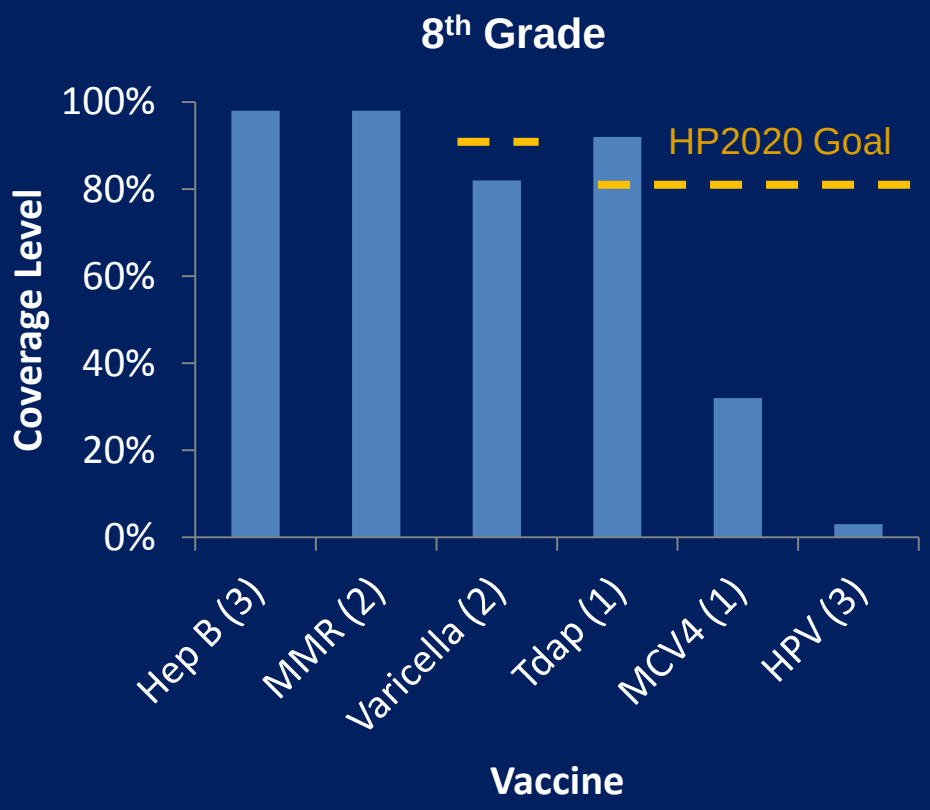
7th and 8th Grade Up-to-Date





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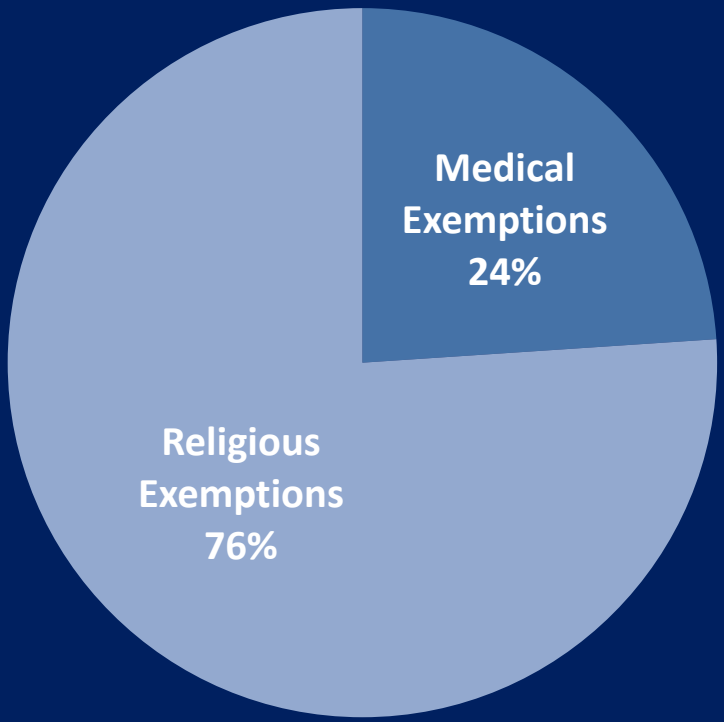
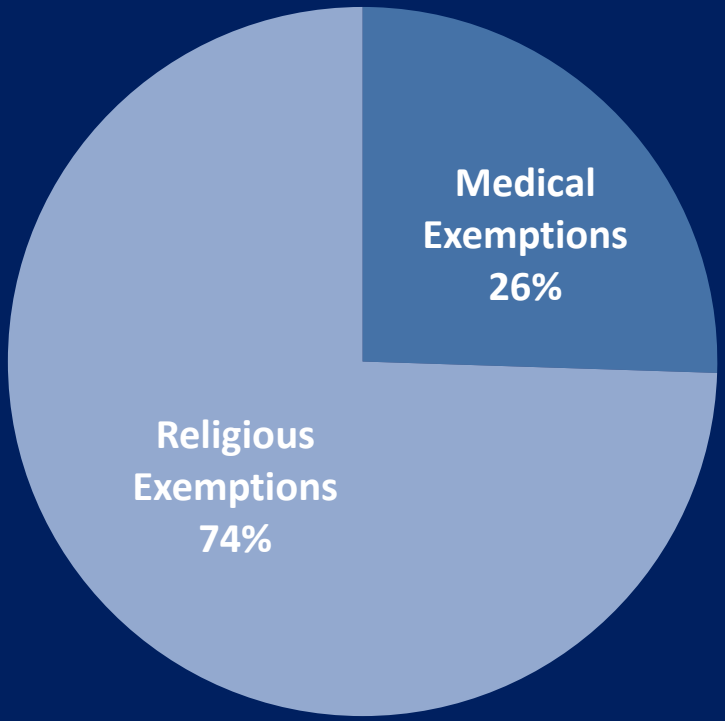
7th and 8th Grade Exemptions

7th Grade
Total number of exemptions: 497 (1%)



8th Grade
Total number of exemptions: 439 (1%)



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Study Limitations

- **Validity of responses are unknown**
  - **Validation not complete at this time**
- **Immunizations not required for school may not be recorded on immunization document**
- **WebIZ data extraction may not be complete**
- **Variability in school responses**
  - **Varicella (1 dose)**
  - **Exemptions**

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Conclusions

- **6th Grade**
  - **No HP2020 goals met**
  - **Exemptions account for 1% of enrollment**
- **7th and 8th Grades**
  - **Tdap meets HP2020 goal of 80%**
  - **Exemptions account for 1% of each enrollment**
- **MCV4 and HPV have lowest coverage levels for all three grades**

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CHILDREN: KINDERGARTEN AND 24-MONTH-OLD ASSESSMENTS

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Background

- **Long-standing study performed by KDHE**
- **Objective: evaluate immunization coverage levels for Kansas children**
- **Immunization Goals – Healthy People 2020 (HP2020) for kindergarten, HP2010 for 19-35 month olds**
  - **≥95% coverage for kindergarten immunizations (DTaP5, Polio4, MMR2, HepB3, Var2)**
  - **≥90% coverage for 19-35 month old immunizations (DTaP4, Polio3, MMR1, Hib3, HepB3, Var1)**
  - **≥80% coverage for complete 4-3-1-3-3 series at 19-35 month old**

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Methods

- **Letter sent to all schools with a kindergarten class**
  - **Specifies how to select immunization records**
  - **KCIs or other immunization documents**
  - **KS-WebIZ**
- **Data entry of all immunization records received by KDHE (~15,000 annually)**
- **Analysis**
  - **Retrospectively – 24 months of age**
  - **Kindergarten entry**

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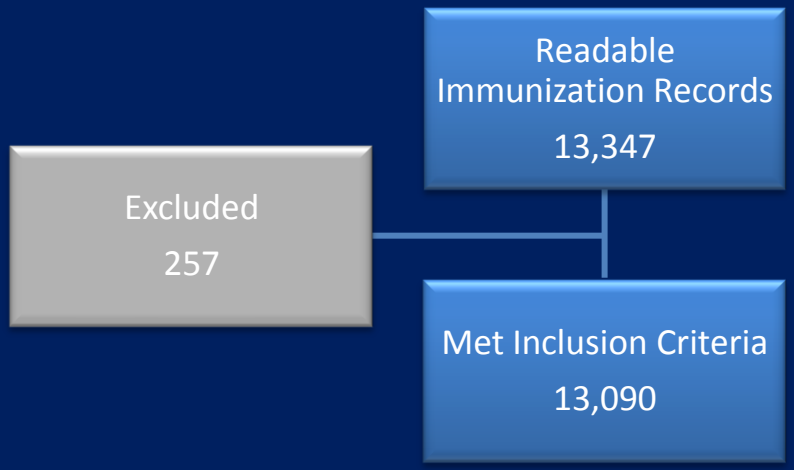
Study Inclusion

- **Inclusion Criteria:**
  - **Between the ages of 5 and 7 at school entry**



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KINDERGARTEN STUDY
Results

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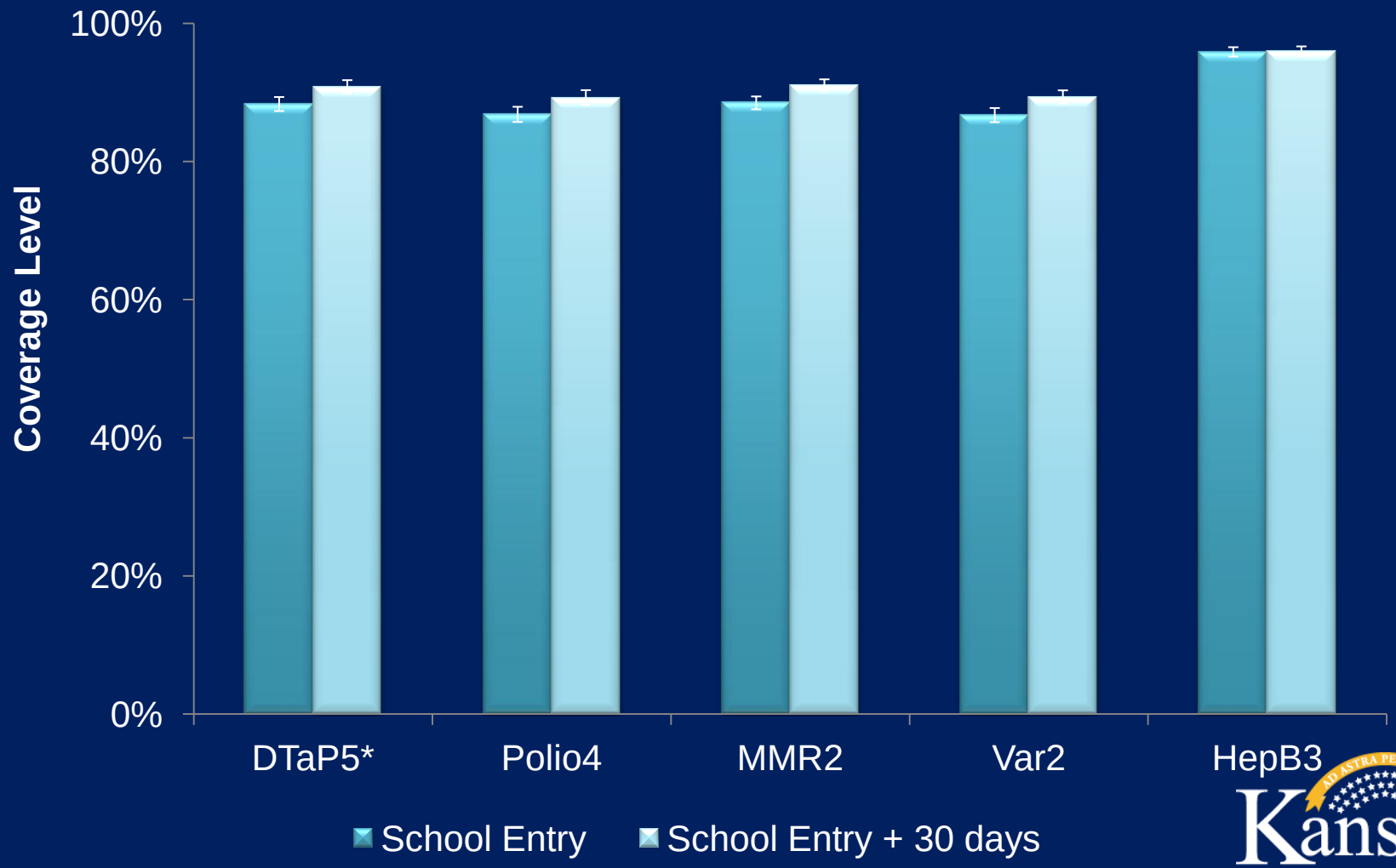
Kindergarten Immunization Coverage



*5 doses of DTaP or 4 doses if the 4th is administered on or after their 4th birthday

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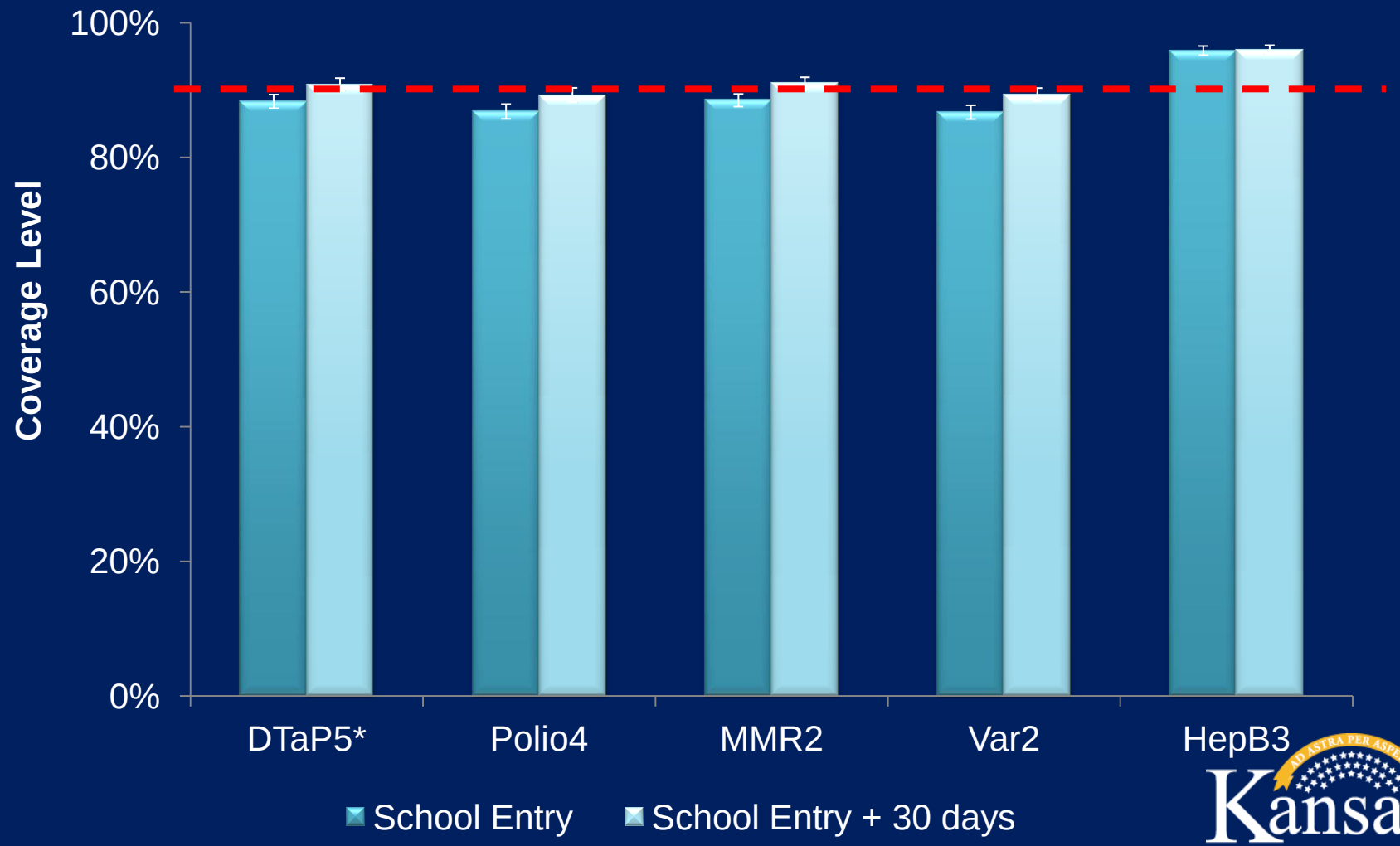
Kindergarten Immunization Coverage



*5 doses of DTaP or 4 doses if the 4th is administered on or after their 4th birthday

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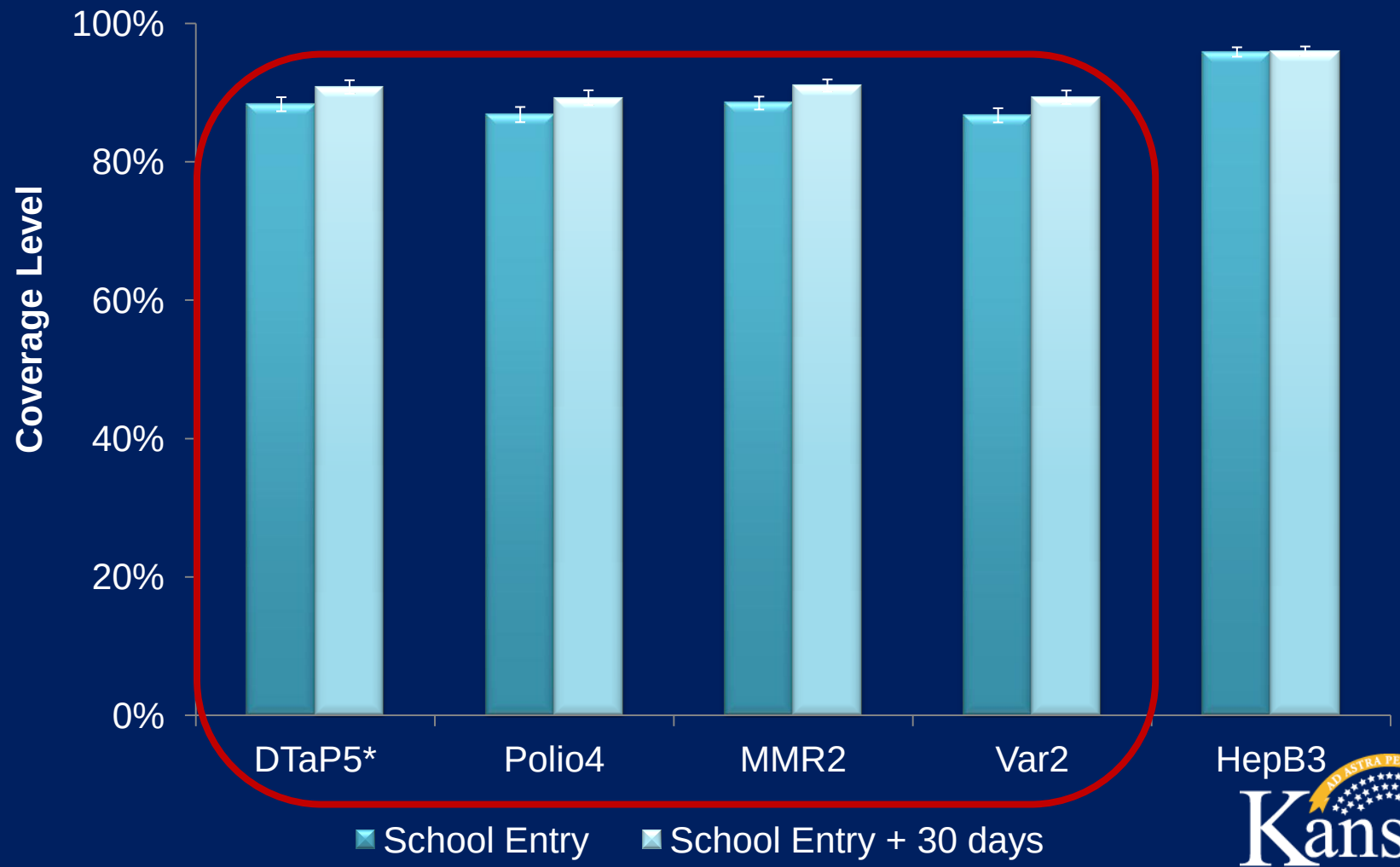
Kindergarten Immunization Coverage



*5 doses of DTaP or 4 doses if the 4th is administered on or after their 4th birthday

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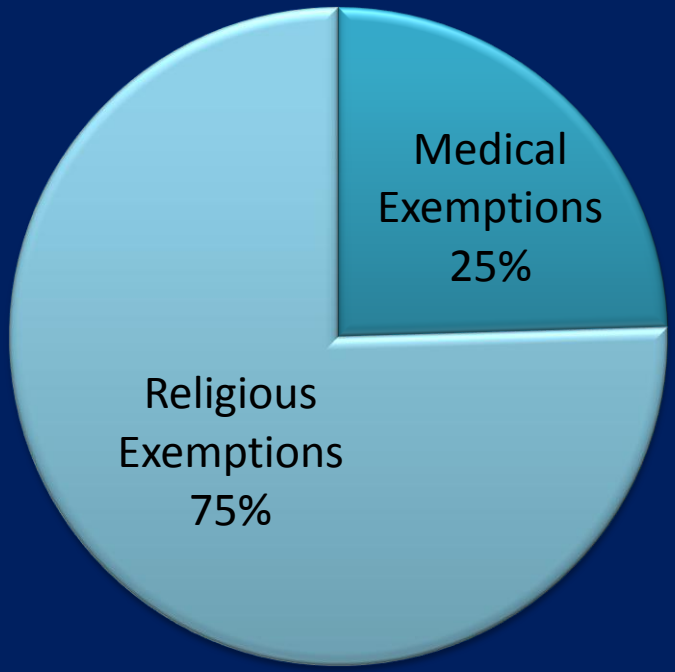
Reported Exemptions

Total number of exemptions: 481 (1.4%)



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RETROSPECTIVE STUDY
Results

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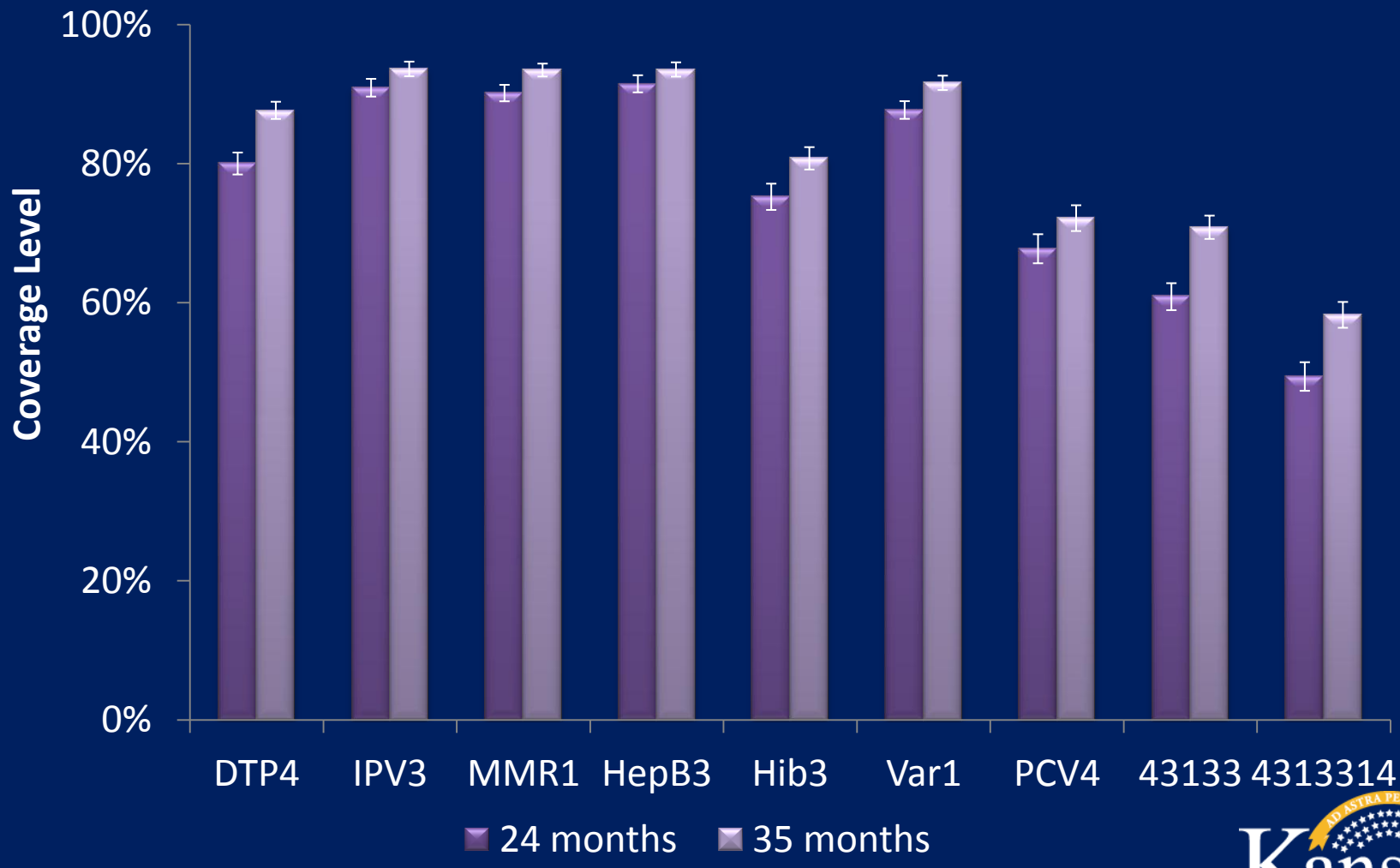
Retrospective Immunization Coverage



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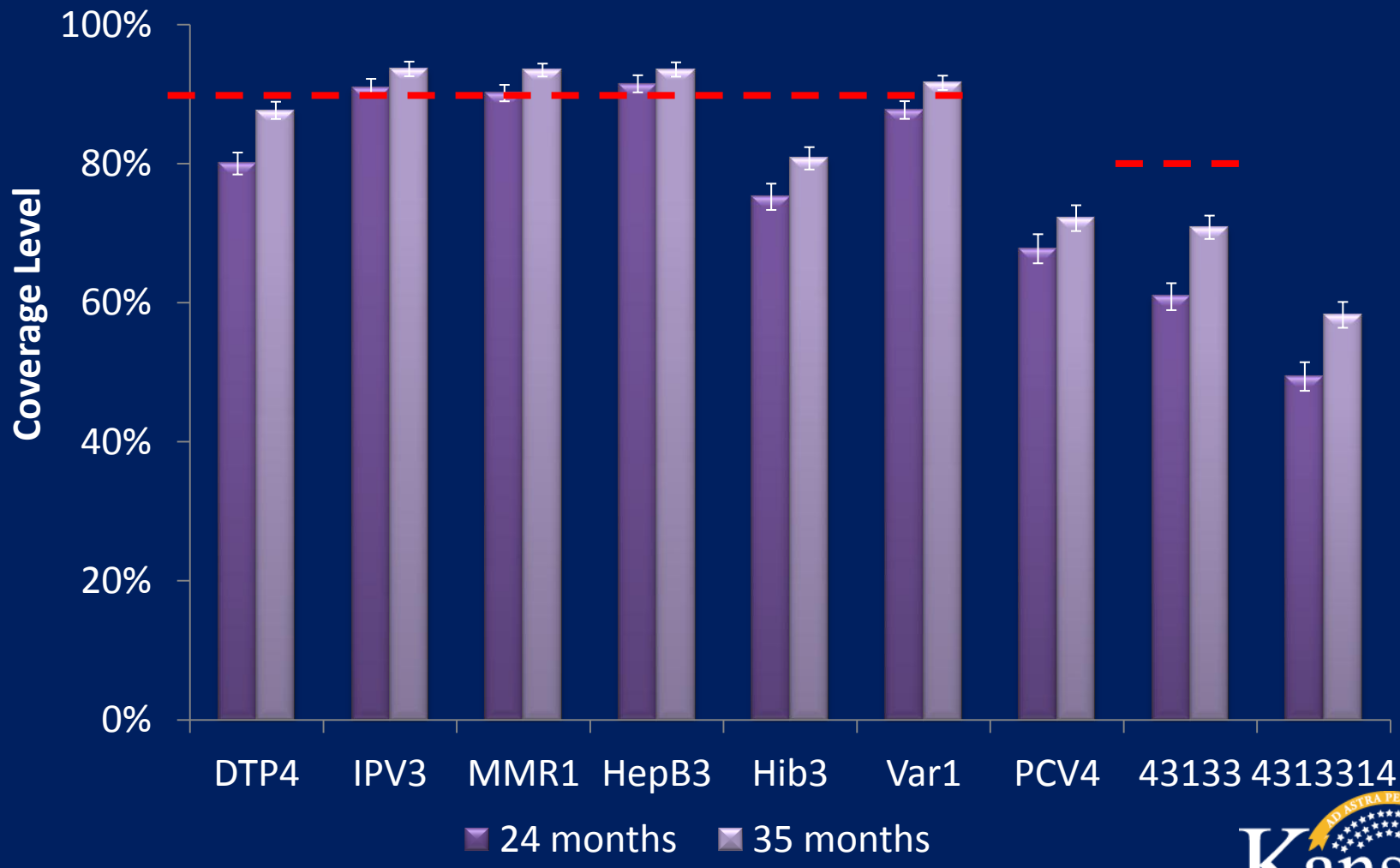
Retrospective Immunization Coverage



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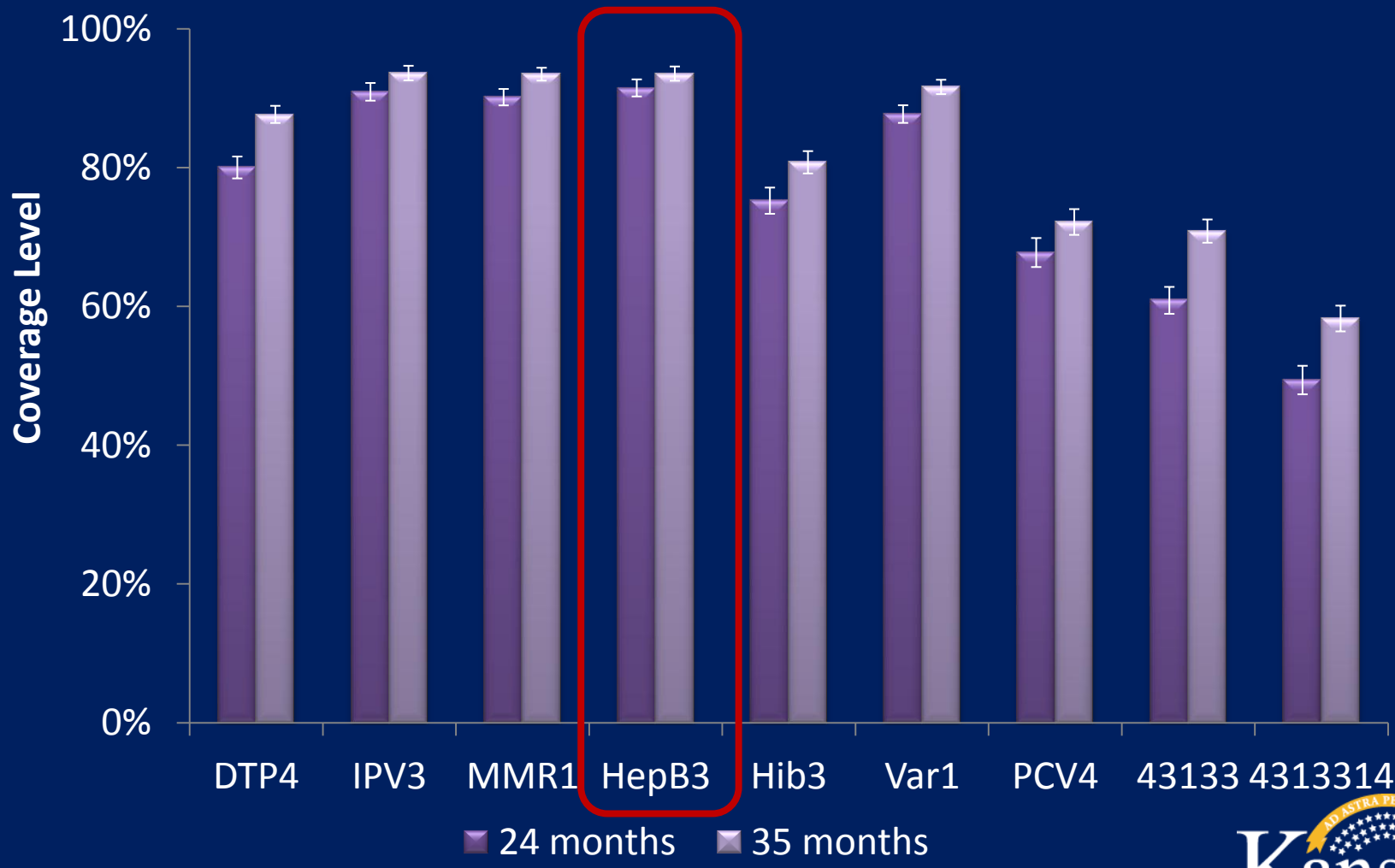
Retrospective Immunization Coverage



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Study Limitations

- **Immunizations not required for school may not be recorded on immunization document**
- **Lack of descriptive data**
- **KS-WebIZ data not always entered correctly**

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Kindergarten Study

- **Immunization levels increase 30 days following school entry**
- **Most immunizations are below HP2020 goals at school entry**
- **Exemptions are approximately 1.4% of kindergarten population**

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Retrospective Study

- **Three vaccinations (MMR1, HepB3, Polio3) meet HP2010 goals by children at 24 months**
- **By 35 months, varicella also meets HP2010 goal**
- **DTaP4 remains low**
- **PCV4 has lowest immunization coverage level**

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Questions?

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Perinatal Hepatitis B Prevention Program (PHBPP)

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Chronic HBV

- **Major cause of:**
  - **Cirrhosis of the liver**
  - **Primary hepatocellular carcinoma**
- **Development of chronic HBV is age dependent**
- **Primary develops into chronic infection**
  - **5% of healthy older children and adults**
  - **30% of children <5 years old**
  - **90% of infants**

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Chronic HBV

- **~ 25% of infected infants will develop**
  - **Chronic liver disease**
  - **Cirrhosis**
  - **Hepatocellular carcinoma**
- **~ 25% of infected infants die as young adults**

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Perinatal HBV

- **Infection of infant after birth**
- **Risk of perinatal HBV infection among infants born to HBV+ mothers ranges from 10%-85%**

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Kansas Law Requires

- **Physicians to test for HBV during each pregnancy (K.S.A. 65-153f)**
- **Laboratories to report positive results to the KDHE (K.S.R. 28-1-2)**
- **Births be registered with the KDHE Office of Vital Statistics within 5 days of birth (K.S.A. 65-2409a)**
  - **>95% registered electronically**

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PHBPP Coordinator

- **Identifies all HBV positive lab reports from women ages 12-55**
  - **Pregnancy status is not on the lab reports**
- **Notifies county health departments through EpiTrax**
  - **Pregnant women go into the perinatal hepatitis B prevention program**

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Local Health Departments

- **Establish pregnancy status**
- **Identify all relevant contacts**
  - **Test and HBV vaccine if not protected or infected**
- **Notify expected delivery hospital**
- **Follow infant through post-vaccination serologic testing**
- **Communicate findings to KDHE**

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www.kdheks.gov/immunize/phbpp

Perinatal Hepatitis B Prevention Program Manual

Kansas
Department of Health and Environment

Perinatal Hepatitis B Prevention Program
Infectious Disease Epidemiology and Response
Bureau of Epidemiology and Public Health Informatics
Kansas Department of Health and Environment
1000 SW Jackson, Suite 210
Topeka, Kansas 66612-1290
Telephone (785) 296-1059 Fax (785) 291-3775
Reporting Hotline: Telephone (877) 427-7317 Fax (877) 427-7318

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Resources for:

- **Hospitals**
- **OB/GYNs**
- **Pediatricians**
- **Public Health**

Public Health
Prevent. Promote. Protect.

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Report Forms

Disease Reporting for Health Professionals

http://www.kdheks.gov/epi/disease_reporting.html

- Disease Reporting Requirements
- Kansas Notifiable Diseases List and Reporting Forms
  - Kansas Notifiable Diseases List and Reporting Form (.pdf)
  - Varicella Report Form (.pdf)
  - Perinatal Hepatitis B Prevention Program Report Forms
    - Hospital Report Form (.pdf)
    - Prenatal Care Provider Report Form (.pdf)
    - Pediatric Care Provider Report Form (.pdf)

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PRENATAL CARE PROVIDER REPORT FORM

PERINATAL HEPATITIS B PREVENTION

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HOSPITAL REPORT FORM

PERINATAL HEPATITIS B PREVENTION

Follow-up of infants born to HBsAg positive mothers

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PEDIATRIC CARE REPORT FORM

PERINATAL HEPATITIS B PREVENTION

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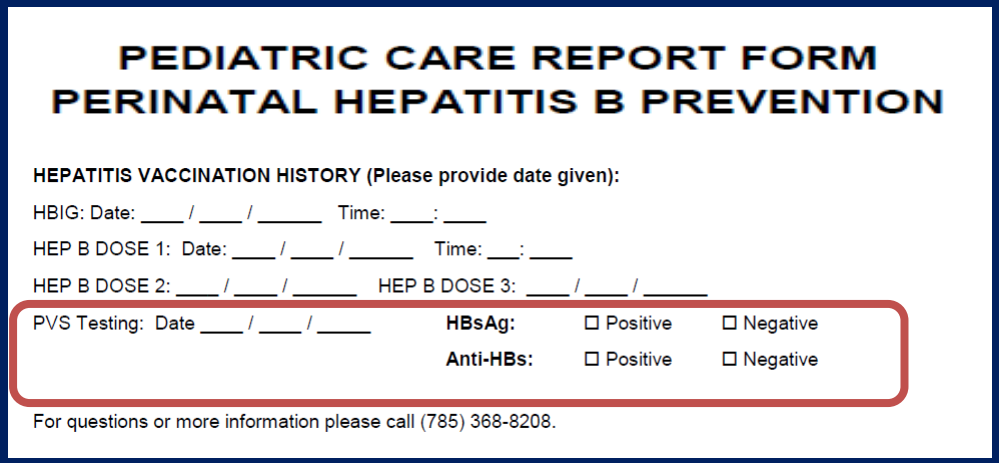
Post-Vaccination Serologic Testing (PVST)

- **Performed at 9-18 months of age (≥ 3 months after last dose)**
  - **Hepatitis B surface antigen**
  - **Anti-HBs**
- **Working to have PVST provided through the state laboratory for infants in PHBPP – STAY TUNED**



PEDIATRIC CARE REPORT FORM
PERINATAL HEPATITIS B PREVENTION

HEPATITIS VACCINATION HISTORY (Please provide date given):

HBIG: Date: ____ / ____ / _____ Time: ____: ____

HEP B DOSE 1: Date: ____ / ____ / _____ Time: ____: ____

HEP B DOSE 2: ____ / ____ / _____ HEP B DOSE 3: ____ / ____ / _____

PVS Testing: Date ____ / ____ / _____ **HBsAg:** ☐ Positive ☐ Negative

Anti-HBs: ☐ Positive ☐ Negative

For questions or more information please call (785) 368-8208.

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Questions?

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www.kdheks.gov

Bureau of Epidemiology and Public Health Informatics

Epithotline@kdheks.gov

Epidemiology Hotline 877-427-7317